



# INDIANA FIRE SERVICE CERTIFIED INSTRUCTOR I RECERTIFICATION

State Form 54497 (R / 10-11)

**INDIANA DEPARTMENT OF HOMELAND SECURITY**  
302 West Washington Street, Room E239  
Indianapolis, IN 46204  
Telephone: (800) 666-7784  
E-mail: [psidquestions@dhs.in.gov](mailto:psidquestions@dhs.in.gov)  
Certification website: [www.in.gov/dhs](http://www.in.gov/dhs)  
District fire training website: [www.indianafiretraining.com](http://www.indianafiretraining.com)



- INSTRUCTIONS:**
1. Documentation must include a minimum of six (6) hours of adult education and/or twenty-four (24) hours of teaching.
  2. This form must be submitted electronically to the IDHS Certification Section thirty (30) days before the Instructor expiration date. Submit the complete form to [firecertifications@dhs.in.gov](mailto:firecertifications@dhs.in.gov).

To maintain certification, the candidate shall accrue a minimum of thirty (30) hours of continuing education, consisting of at least eighteen (18) hours of teaching classes in public safety and emergency response, at least six (6) hours of evaluating practical skills, and at least six (6) hours of attendance at classes in training in adult education, for example:

- (1) learning objectives;
- (2) test construction; or
- (3) classroom teaching;

that must be reported, on a form approved by the training division, every three (3) years. The report must be received by the board not later than thirty (30) days after the expiration of the three (3) year period that commenced on the date of initial certification of the applicable three (3) year anniversary of the date.

The training in adult education must be acquired through classes that teach instructors techniques on teaching adult students.

Continuing education obtained in compliance with the requirements of subsection (c) may be used to comply with the continuing education requirements of section 19(c) of this rule. (Board of Firefighting Personnel Standards and Education; 655 IAC 1-2.1-20; filed Jul 18, 1996, 3:00 p.m.: 19 IR 3394; filed Sep 24, 1999, 10:02 a.m.: 23 IR 332; readopted filed Dec 2, 2002, 12:59 p.m.: 26 IR 1262; filed Jul 14, 2004, 10:00 a.m.: 27 IR 4016; filed Apr 13, 2005, 11:30 a.m.: 28 IR 2702)

### Qualified Adult Continuing Education Topics

A course or part of a course that instructs the instructor on:

- basic coaching and techniques used in an instructional situation
- adaptation of lesson plans to specific instructional situations
- learning styles of students how instructor could adapt teaching styles
- types of learning disabilities and methods for dealing with them
- methods of dealing with disruptive and unsafe behavior
- communication skills necessary to be an effective instructor
- how to provide evaluation feedback to students, given evaluation data, so that the feedback is timely, specific enough for the student to make efforts to modify behavior objective, clear, and relevant; include suggestions based on the data
- use and limitations of teaching methods and techniques
- how to supervise other instructors and students during training, given a training scenario with increased hazard exposure, so that applicable safety standards and practices are followed, and instructional goals are met
- development of student evaluation instruments to support instruction and the evaluation of test results
- conducting a needs assessment for an organization, an individual, or set of students

### APPLICANT INFORMATION

Legal name	Public safety identification number	E-mail address
Address (number and street, city state, and ZIP code)		

### *Identify continuing education and/or instructional activity completed during the three (3) year certification period.*

Adult Continuing Education Subject	Name of Instructor	Hours	Date (month, day, year)

*Identify continuing education and/or instructional activity completed during the three (3) year certification period (continued).*

Teaching Experience - <i>Identify subject / topic taught.</i>	Location	Hours	Date (month, day, year)

I hereby apply for recertification as an Instructor I according to the rules established by the Board of Firefighting Personnel Standards and Education. All requirements for recertification have been successfully completed. By placing my name in the applicant box below and submitting this completed form for recertification, ***I attest, under the penalty of perjury, that the report is a true and an accurate account of my in service training and education.***

Signature	Date (month, day, year)
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