

COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



2023-2024 Colusa County Office of Education Fire Academy

Applications will be accepted between September 11, 2023 and October 20, 2023 from 8:00 a.m. to 4:00 pm at 499 Marguerite Street, Suite C, Williams, CA 95987 (Colusa County Office of Educational Services). **Incomplete applications will not be accepted so please follow all steps.**

- A screening panel will review **only completed applications** to determine which candidates will be considered.
- Class size is limited to 25 students.
- Priority registration will be given to graduating high school seniors.

A career in fire protection offers the opportunity to perform challenging and exciting work while protecting residents, resources, and property in the State of California. Prospective Colusa County Office of Education Fire Academy Firefighters will start their education on January 5, 2024. Upon successful completion of the 370-hours taught to Firefighter 1 standards, the student will receive fire service certifications, a CCOE/CTE Certificate of Achievement and eligibility to apply for California Department of Forestry and Fire Protection (CALFIRE). The academy is open to high school seniors (18 years of age by June 1, 2024) and adults.

2023-2024 Colusa County Office of Education Fire Academy Schedule

- October 20, 2023 - Application due
- October 25, 2023 – Selected candidates will be notified
- November 18, 2024, 3:00 pm-5:00 pm –Mandatory Orientation for Cadets @ Education Village
- January 5, 2024 – April 28, 2024 - Classes in session
- 17 weekends - total of 370 hours
- Friday - **5:30pm-9:30pm** (end times are subject to change)
- Saturday & Sunday - **7:00am-5:00pm** (end times are subject to change)

Academy Details

Training may include:

- Fire Attack Strategies
 - Wildland Fire Control
 - Interior Structure Operations
- Fire Line Construction
- Fire Engine Operations
- Confined Space Awareness
- HAZMAT certification
- Firefighter Safety

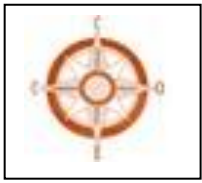
Cost:

- Tuition: \$2000 (*subject to change each year due to changes in costs)
- Uniform: Approximately \$400 (includes pants, shirts, gloves & shorts)
- Gear Rental: Approximately \$900 (includes shipping)
- Students may be eligible for scholarships, details provided at Orientation. Questions? Call (530) 473-1350

Location:

- Education Village – Multipurpose Room – 499 Marguerite Street, Williams, CA 95987

SENIORS IN HIGH SCHOOL – contact your high school counselor or administrator to discuss enrollment in this CTE class.



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



Colusa County Office of Education Fire Academy Application Requirements

To be considered for the Colusa County Office of Education Fire Academy, please complete and return all pages of this application to the Educational Services office of the Education Village by October 20, 2023. The academy will fill quickly; therefore, students with complete paperwork will receive priority for review by a screening panel and interview committee. Please include ALL of the following items:

- _____ Completed Application
- _____ Signed Requirements and Expectations Form
- _____ Completed Physical Evaluation Form including:

- Proof of 1 Negative PPD Test
- Tetanus Vaccination
- Hep B 1, 2, & 3 Series

Physical must be current and within 90 days of the start of class. Physicals must be completed on the form included in this application packet (Last 2 pages).

- _____ Signed Criminal Background Disqualification Form
- _____ Signed Waiver and Release of Liability Form
- _____ Letter of Recommendation
- _____ A copy of your High School Diploma, CHSPE, GED or transcript showing proof of graduation (High School seniors will submit a current transcript)
- _____ Signed High School Agreement (High School Seniors Only)

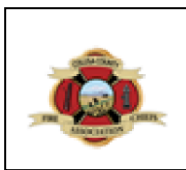
_____ **Academy Fees** (Required from selected cadets prior to the first day of class, unless prior arrangements made)

- Tuition: \$2000
- Uniform: Approx. \$400 (depending on number of shirts purchased & types of boots chosen)
- Gear Rental: Approximately \$764

_____ **Additional Fees**

- Applicants are responsible for all costs associated with physical evaluation and inoculations. Physical must be 90 days prior to submitting the application.
- Applicants must wear undamaged 100% leather boots and gloves during the academy.
- Applicants will be responsible for purchasing a Standard Uniform. Specifics will be addressed at the Orientation on 11/18/2023.
- Applicant will be responsible for transportation to training at four off-site locations during the academy.





COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



CURRENT EMPLOYMENT:

Are you currently employed? ☐Yes ☐No Where? _____

Address: _____ Phone Number: _____

PREVIOUS EMPLOYMENT:

Organization	Address	Position	Dates

REFERENCES: Please list the names of the individuals as a reference for this program.

Name	Address	Phone Number

Do you know anyone who has taken this course? If so, who is this person and how do you know this individual?

Please describe in a paragraph your academic and work experience in the fire service:



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343

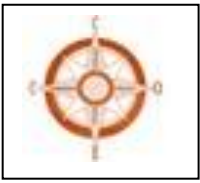


Explain why you are interested in the Colusa County Office of Education Fire Academy course:

Describe the duties of a Firefighter:

What hourly salary do you expect to earn at the completion of this course? How did you arrive at this amount?

What is your career goal for the next 5 years?



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



Provide any interesting information about yourself that you would like for us to know.
This can be personal, academic, or professional.

I hereby certify that the above information is true to the best of my knowledge. I understand that any falsification will result in cancellation of this application. Refunds are **not** given for “no shows” or cancellation on or after the first day of class, nor if I fail any certification during the academy. I understand that I am responsible for all fees regardless of whether I complete the academy.

Signature

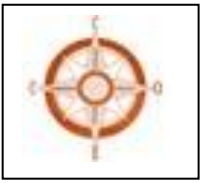
Date

Bring to: Colusa County Office of Education
Educational Services: Adult Education
“Education Village”
499 Marguerite Street, Suite C
Williams, CA 95987

Attention: Jeremiah Karlonas
530-908-0583
Jeremiah.Karlonas@fire.ca.gov

Or

John Ithurburn
Assistant Superintendent
530-473-1350, ext. 10834
jithurburn@ccoe.net



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



Requirements and Expectations

The goal of CTE Colusa County Office of Education Fire Academy is to prepare students to become competent, confident, and skilled in the fire protection profession. In addition, you will receive training on how to prepare a resume and fill out job applications.

Listed below are the requirements and expectations for class participation. Please read and initial the following:

The Student Must:

- _____ Be free of infectious disease
- _____ Maintain hands and arms free of disease (No acrylic nails)
- _____ Meet and pass the medical requirements of the Physical Evaluation form (must be completed and signed by a physician)

In addition, students must agree to the following:

- _____ Interact in a positive and professional manner with instructors, fellow students, and training staff.
- _____ Comply with classroom/training site attire/appearance requirements.
- _____ Attend class, on time, as scheduled by the instructor.
- _____ Behave and perform in a professional manner.

Your signature below acknowledges that you are verifying the information to be true and correct and that you understand the class requirements.

Signature

Date



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343

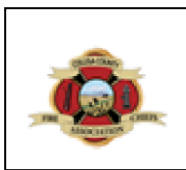
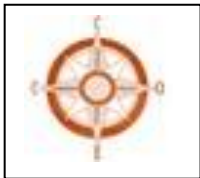


Disqualifying Penal Code Sections

If you have been convicted of any of the following crimes, you cannot receive licensure in health care related professions and CCOE/CTE cannot enroll you in any healthcare related classes. You may seek action with the courts to expunge your record, and then apply for the classes. All students in healthcare related classes undergo a Department of Justice background check. If you are found to have committed a crime on the following list, you will be dropped from the course. There will be no refunds of payments made if you are dropped from the course.

All applicants should review this list carefully to avoid wasting their time, effort and money by training, testing and submission of their background check request since they cannot receive the required criminal background clearance if they have been convicted of any of these violations.

Section		Section	
187	Murder	273a	Willful harm or injury to a child; (Includes degrees (a)-(c)
192(a)	Manslaughter, Voluntary	273d	Corporal punishment/injury to a child (Includes degrees (a)-(c)
203	Mayhem	273.5	Willful infliction of corporal injury (includes (a)-(h)
205	Aggravated Mayhem	285	Incest
206	Torture	286(c)	Sodomy with person under 14 years against will
207	Kidnapping	286(d)	Voluntarily acting in concert with or aiding and abetting in act of sodomy against will
209	Kidnapping for ransom, reward, or extortion or robbery	286(f)	Sodomy with unconscious victim
210	Extortion by posing as kidnapper	286(g)	Sodomy with victim with mental disorder or developmental or physical disability
210.5	False imprisonment	288	Lewd or lascivious acts with child under age of 14
211	Robbery (Includes degrees in 212.5 (a) and (b)	288a(c)	Oral copulation with person under 14 years against will
220	Assault with intent to commit mayhem, rape, sodomy, oral copulation	288a(d)	Voluntarily acting in concert with or aiding and abetting
222	Administering stupefying drugs to assist in commission of a felony	288a(f)	Oral copulation with unconscious victim
243.4	Sexual battery (Includes degrees (a) - (d))	288a(g)	Oral copulation with victim with mental disorder or developmental or physical disability
245	Assault with deadly weapon, all inclusive	288. 5	Continuous sexual abuse of a child (Includes degree (a)
261	Rape (Includes degrees (a)-(c))	289	Penetration of genital or anal openings by foreign object (Includes degrees (4)-(j)



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343

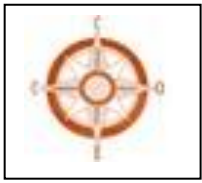


262	Rape of spouse (Includes degrees (a)-(e))	289.5	Rape and sodomy (Includes degrees (a) and (b))
264.1	Rape or penetration of genital or anal openings by foreign object	368	Elder or dependent adult abuse; theft or embezzlement of property (Includes (b)-
265	Abduction for marriage or defilement	451	Arson (Includes degrees (a)-(e))
266	Inveiglement or enticement of female under 18	459	Burglary (Includes degrees in 460 (a) and (b))
266a	Taking person without will or by misrepresentation for prostitution	470	Forgery (Includes (a)-(e))
266b	Taking person by force	475	Possession or receipt of forged bills, notes, trading stamps, lottery tickets or shares (Includes
266c	Sexual act by fear	484	Theft
266d	Receiving money to place person in cohabitation	484b	Intent to commit theft by fraud
266e	Placing a person for prostitution against will	484d-j	Theft of access card, forgery of access card, unlawful use of access card
266f	Selling a person	487	Grand theft (Includes degrees (a)-(d))
266g	Prostitution of wife by force	488	Petty theft
266h	Pimping	496	Receiving stolen property (Includes (a)-(c))
266i	Pandering	503	Embezzlement
266j	Placing child under 16 for lewd act	518	Extortion
266k	Felony enhancement for pimping/pandering	666	Repeat convictions for petty theft, grand theft, burglary, carjacking, robbery and receipt of stolen
267	Abduction of person under 18 for purposes of prostitution		

I have read the above statements and understand that I may be dropped from the class, with no refund, if DOJ review indicates that I have a record of committing any of the above offenses.

Signature: _____

Date: _____



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



Waiver, Release of Liability, and Assumption of Risk

I acknowledge that I am an applicant for the Colusa County Office of Education Fire Academy (CFA) with the Colusa County Office of Education. I also understand and acknowledge that;

- 1) The CFA class **will involve strenuous physical activity and movement**, which may be dangerous and hazardous,
- 2) There is a risk that a serious accident may occur during my participation in the CFA class,
- 3) As a participant in the CFA class, I may suffer personal injury and harm, and
- 4) The injury or harm may be caused by Colusa County Office of Education staff, other participants, or a dangerous property condition. Knowing the risks involved, I nevertheless agree and consent to participate in the CFA class.

In exchange for participating in the Colusa County Office of Education Fire Academy (CFA) class:

- I voluntarily assume any and all risks of injury, death and property damage related to my participation in the CFA class and knowingly agree to this waiver and release.
- I agree to waive, release, discharge, and promise not to sue the Colusa County Office of Education, its officers, officials, employees, agents, and volunteers from and for any and all claims for damages for bodily injury, personal injury, death, or property damage that I may have, suffer or experience as a result of my participation in the CFA class. This release is intended to discharge, in advance, the Colusa County Office of Education, its officers, officials, employees, agents, and volunteers from and against any and all liability arising out of, or connected in any way with, my participation in the CFA class, even though that liability may arise out of negligence on the part of the Colusa County Office of Education, its officers, officials, employees, agents, and volunteers.
- I agree to indemnify, defend and hold the Colusa County Office of Education and its officers, officials, employees, agents, and volunteers harmless from any loss, liability, claim, damage, or expense that they may incur as a result of my participation in the CFA class.
- I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.
- I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the producers, sponsors, and organizers.

I understand and agree that this waiver, release, and assumption of risk will bind my heirs, executors, administrators and assigns.

I HAVE READ THIS WAIVER, RELEASE OF LIABILITY, AND ASSUMPTION OF RISK. I FULLY UNDERSTAND ITS TERMS. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND I SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT

 Participant's Signature

 Participant's Name

 Age

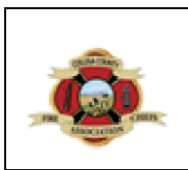
 Date

 Parent/Guardian Signature

 Parent/Guardian Name

 Date

(If under 18 years old, Parent or Guardian must also sign)



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



Student Physical Evaluation

Student's/Patient's Name: _____ Date of Birth: _____

Date of this Physical Evaluation: _____

Medical History

Do you have or have has in the past:

Condition	Yes	No	If yes, please explain
Seizures or neurological disorder(s)			
Eye, ear, nose or throat disorder(s)			
Diabetes, thyroid or other endocrine disorder(s)			
Muscle, bone or joint disorder(s)			
Asthma or respiratory disorder(s)			
Heart or circulation disorder(s)			
Skin disorder			
Gastrointestinal disorder(s)			
Psychiatric disorder(s)			

Previous Hospitalizations or Surgical History (date and reason)

Current Medication: _____

Is the patient currently pregnant? ☐ Yes ☐ No

Allergies: _____

Physical Examination (This is a physical evaluation for occupational ability and is not to be interpreted as a diagnostic medical examination.)

Height: _____ Weight: _____ B/P: _____ P: _____

Ears, Nose, & Throat: _____

Neck: _____ Lymph Nodes: _____

Skin: _____

Heart: _____ Lungs: _____

Extremities: _____

Neurological: _____

Mantoux PPD test must be completed by submission of application

1st PPD Test Date: _____ ☐ Positive ☐ Negative

Chest X-Ray (is necessary) Date: _____ ☐ Positive ☐ Negative

Tetanus Vaccination (Must be current within 10 years): _____

HepB #1: _____ HepB #2: _____ HepB #3: _____

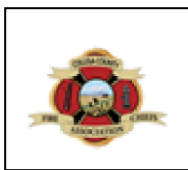
Can this student perform the essential motor and sensory functions required of firefighter students? ☐ Yes ☐ No

A DESCRIPTION IS GIVEN BELOW OF THE PHYSICAL STRESSES TO WHICH A CANDIDATE IS SUBJECTED TO AT COLUSA COUNTY BASIC FIRE ACADEMY. YOUR JUDGMENT IS NEEDED AS TO THE CADET'S CAPACITY TO PERFORM THE REQUIRED DUTIES. IN YOUR CONCLUSION, TAKE INTO ACCOUNT THE LONG-RANGE OUTLOOK FOR CONTINUED PERFORMANCE, AND THE CADETS ABILITY TO SAFELY PERFORM THESE DUTIES WITHOUT SIGNIFICANT INCREASED RISK OF INJURY TO SELF OR OTHERS BECAUSE OF MEDICAL CONDITION.

Cadets will work under the supervision of an instructor, to do the heavy physical work involved in firefighter training.

The cadet will be required to: pull various sizes of hose (up stairs, ladders, and hills), use hand tools to cut handline, throw ladders, hike on uneven terrain with extra weight, bend and twist their bodies, run chainsaws on roofs, use axes and sledge hammers to force doors open, all during periods of temperatures over 100 degrees.

A cadet must have visual acuity (Snellen) of not less than 20/100 without correction in each eye, corrected to not less than 20/30 in one eye; must have color vision sufficient to correctly identify vehicles; hearing adequacy within speech frequencies (uncorrected); and full use of both hands and



COLUSA COUNTY OFFICE OF EDUCATION
Michael P. West, Superintendent of Schools
Educational Services
499 Marguerite St., Suite C, Williams, CA 95987
Phone: (530) 473-1350 Fax: (530) 473-1343



feet. The individual must have the necessary strength and agility required for extensive bending, stooping, and squatting. The Candidate must be able to work in situations where heat is intense, in addition be able to tolerate heavy smoke, dust and exposure.

The cadet will be required to wear respiratory protection equipment (including self-contained breathing apparatus (SCBA). The use of such equipment may place a physiological burden on the cadet that varies with the type of equipment used, the job and workplace conditions in which the equipment is used, and the medical status of the incumbent.

The cadet typically is required to perform psychologically stressful and/or physically demanding duties consistent with firefighting, disaster response, and emergency medical response, including working in isolated areas, walking or running on uneven, rough terrain with 50 plus pounds of gear.

Duties involve field work requiring physical performance calling for above-average ability, endurance, and superior condition, including occasional demand for extraordinarily strenuous activities, under adverse environmental conditions and over extended periods of time; requires running, walking, difficult climbing, jumping, twisting, bending, and lifting over 25 pounds.

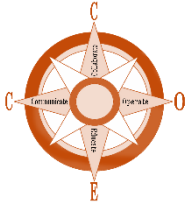
THE UNDERSIGNED CERTIFIES THAT HE/SHE HAS READ THE PHYSICAL/MENTAL STRESS JOB DESCRIPTION FOR THE CADET NAMED BELOW AND THAT IN HIS/HER JUDGMENT THE CADET HAS THE CAPACITY TO PERFORM THE REQUIRED DUTIES, HAS TAKEN INTO ACCOUNT THE LONG-RANGE OUTLOOK FOR CONTINUED PERFORMANCE, AND THE EMPLOYEE IS ABLE TO SAFELY PERFORM THESE DUTIES WITHOUT SIGNIFICANT INCREASED RISK OF INJURY TO SELF OR OTHERS BECAUSE OF MEDICAL CONDITION.

Candidate's Name

Medical Provider's Name

Date

Medical Provider's Signature



Colusa County Office of Education

Photo/Media Release Agreement

Throughout the year, Colusa County Office of Education (CCOE) will actively promote and educate the community regarding the merits and progress of CCOE. We will use all available methods, i.e. news releases, videotapes, photo displays, brochures, the CCOE website, YouTube channels, social media, etc.

We are, therefore, requesting your assistance by authorizing us to use any photographs, videotapes, or comments that we may take or receive of you during the year for editorial, trade, educational or advertising of CCOE and its programs. The photos and videos may also be used on the CCOE website (CCOE.net), YouTube channels, or on social media platforms such as Facebook, Instagram, and Twitter. These images and/or comments will not be used for any other purpose.

PHOTO/MEDIA RELEASE AGREEMENT - ADULT

I hereby ☐ **CONSENT** or ☐ **DECLINE** to authorize the Colusa County Office of Education (CCOE) to use and reproduce any and all photographs, videotape recordings or comments, which have been taken or received of me, without compensation in any manner. All negatives and positives, and tapes, together with the prints shall constitute CCOE property, solely and completely.

I am over 18 years of age: ☐ Yes ☐ No

Name (please print): _____

Address: _____

Signature: _____ Date: _____

PHOTO/MEDIA RELEASE AGREEMENT – CHILD

IF THE PERSON SIGNING IS UNDER 18, THERE MUST BE CONSENT BY A PARENT/GUARDIAN AS FOLLOWS:

I hereby certify I am the parent or guardian of: _____

and I ☐ **CONSENT** or ☐ **DECLINE** to authorize to authorize the Colusa County Office of Education (CCOE) to use and reproduce any and all photographs, videotape recordings or comments, which have been taken or received of my child, without compensation in any manner. All negatives and positives, and tapes, together with the prints shall constitute CCOE property, solely and completely.

Signature of Parent/Guardian: _____ Date: _____