



**Monmouth County Fire Academy**  
 1027 Highway 33 East  
 Freehold, NJ 07728  
 Office: 732-683-8857  
 Fax: 732-683-8978

<b>Advanced Class Registration Form</b> <i>**If you are a returning student AND your information is the same, only fill out the asterisked lines**</i> If any of your information has changed, please provide the new information so we can update our records. All new students must provide all of the below information.	
_____ <b>*Student's Name</b>	_____ <b>*Student 6 Digit DFS #/If no DFS #, last 4 Digits of S.S.#</b>
_____ <b>Student's Street Address</b>	_____ <b>*Student E-mail Address</b>
_____ <b>Town, State, Zip</b>	_____ <b>Fire Department Name &amp; Station # (Not phone #)</b>
_____ <b>Phone #</b>	_____ <b>*Date this application was filled out</b>

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<b>Course Title you are applying for</b>	<b>Course Number</b>	<b>Course Start Date</b>
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<b>Department Authorized Signature Block</b>	
<p>I attest that the above applicant is a member of the above fire department, he/she has completed all prerequisites for the course requested as identified by the Monmouth County Fire Academy, and is covered by workers Compensation and Liability Insurance. I understand that course space is limited and that student registration is based on a first come-first serve basis. If a class is canceled or filled and no additional students are allowed, then reenrollment via a new form is required in the future.</p> <p><u>Note: Out-of-County Applications must complete ALL information below. Monmouth County departments only need to complete the Officer signature section on the left.</u></p>	
_____ <b>Department Chief Signature</b>	_____ <b>Out-of-County Dept. Name</b>
_____ <b>Print Dept. Chief Name &amp; Date</b>	_____ <b>Out-of-County Dept. Address</b>
_____ <b>Chief Phone number and email</b>	_____ <b>Out-of-County City, State, zip code</b>

**Note: Out-of-County students, please provide the address of where to send the billing invoice IF different from the fire department address.**