



Office of Training
and Certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

FO1-23

Certification title

**Fire Officer I
SAFETY**

***EXPLAIN THE BENEFITS OF BEING PHYSICALLY AND MEDICALLY
CAPABLE OF PERFORMING ASSIGNED DUTIES***

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

**Standard:
NFPA 1021- 2009 Edition
4.7.3**

Task

Explain the benefits of being physically and medically capable of performing assigned duties and effectively functioning during peak physical demand activities, so that the need to participate in wellness and fitness programs is explained to members.

Conditions and Outcome

Given Department policies and procedures (SOP/SOG), forms/reports, and notepad or computer the Candidate will perform a case study related to documentation of national death and injuries in the fire service and how fire service safety and wellness initiatives can help prevent these issues. The candidate must show examples of how his or her organization is supporting wellness programs and what improvements could be made to current programs within his or her organization. The candidate must present a targeted case study to personnel within his or her organization. **The candidate will complete this task with a minimum of 3 items answered correctly.**

| Number | Task Steps | First Test | | Retest #1 | | Retest #2 | |
|----------|---|------------|------|-----------|------|-----------|------|
| | | Pass | Fail | Pass | Fail | Pass | Fail |
| 1 | Identify a current/relevant issue that is related to death and injuries in the fire service | | | | | | |
| 2 | Use case study information to identify improvements to local wellness and fitness initiative programs (or establish fire service safety and wellness and fitness initiatives for her or his department) | | | | | | |
| 3 | Present a wellness and fitness initiative program to members of his or her organization | | | | | | |
| 4 | Demonstrate ability to effectively communicate orally and in writing | | | | | | |

Final Test Result for Entire Task

| Evaluator signature & comments, Test #1 | | Evaluator signature & comments, Retest #1 | | Evaluator signature & comments, Retest #2 | |
|--|------|--|------|--|------|
| | | | | | |
| Evaluator signature | Date | Evaluator signature | Date | Evaluator signature | Date |
| Candidate signature & acknowledgement, Test #1 | | Candidate signature & acknowledgement, Retest #1 | | Candidate signature & acknowledgement, Retest #2 | |
| By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | | By my signature below I acknowledge I have read and understood the evaluation results and evaluator comments | |
| Candidate signature | Date | Candidate signature | Date | Candidate signature | Date |

