



Office of Training  
and Certification

# New Jersey Division of Fire Safety

## BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

**HMT-24**

Certification title

**Hazardous Material Technician**

### Applicant Information

Candidate name

DFS ID #

Course #

### Evaluation

#### Standard:

NFPA 1072, 2017 edition  
7.4.2

#### Task

**Don, work in, undergo technical decontamination while wearing, and doff structural firefighting PPE.**

#### Conditions and Outcome

This skill involves the use of actual hazardous materials samples, hazardous materials can cause serious injury or fatality. While wearing the appropriate PPE, demonstrate the following general skill steps; specific hazmat incidents may differ in procedure. **Special Note: Specific procedures will vary depending on the equipment used. Always follow the manufactures instructions for complete directions.**

| Number                                   | Task Steps  | First Test |      | Retest #1 |      | Retest #2 |      |
|--|---|------------|------|-----------|------|-----------|------|
|  |   | Pass       | Fail | Pass      | Fail | Pass      | Fail |
| 1  | Perform a visual inspection of PPE and SCBA for damage or defects.  |            |      |           |      |           |      |
| 2  | Don Protective pants and boots.   |            |      |           |      |           |      |
| 3  | Don protective hood, pulling hood down around neck and exposing head.   |            |      |           |      |           |      |
| 4  | Don protective coat.  |            |      |           |      |           |      |
| 5  | Don SCBA. Ensure that the cylinder valve is fully open and that all straps are secured.                                       |            |      |           |      |           |      |
| 6  | Don SCBA face piece and ensure a proper fit and seal.   |            |      |           |      |           |      |
| 7  | Pull hood up completely so that face piece straps and skin are not exposed.   |            |      |           |      |           |      |
| 8  | Don Helmet and secure.  |            |      |           |      |           |      |
| 9  | Don Gloves  |            |      |           |      |           |      |
| 10                                       | Ensure that all fasteners, straps, buckles are fastened.  |            |      |           |      |           |      |
| 11                                       | Ensure that no skin is exposed.   |            |      |           |      |           |      |
| 12                                       | Attach SCBA regulator to face piece and make sure SCBA is functioning properly.   |            |      |           |      |           |      |
| 13                                       | Perform pre-entry checks according to AHJ's SOPs.   |            |      |           |      |           |      |
| 14                                       | Perform work assignment.  |            |      |           |      |           |      |
| 15                                       | Undergo technical decontamination per AHJ's SOPs.   |            |      |           |      |           |      |
| 16                                       | Doff PPE in reverse order according to AHJ's SOPs, avoiding contact with outer ensemble or surfaces that may be contaminated. |            |      |           |      |           |      |
| 17                                       | Conduct a post-entry inspection of PPE for damage or defects according to AHJ's SOPs and document findings.                   |            |      |           |      |           |      |
| <b>Final Test Result for Entire Task</b> |   |            |      |           |      |           |      |

Evaluator signature & comments, Test #1

Evaluator signature & comments, Retest #1

Evaluator signature & comments, Retest #2

|  |      |  |      |  |      |
|--|------|--|------|--|------|
|  |      |  |      |  |      |
| Evaluator signature  | Date | Evaluator signature  | Date | Evaluator signature  | Date |
| <b>Candidate signature &amp; acknowledgement,<br/>Test #1</b>  |      | <b>Candidate signature &amp; acknowledgement,<br/>Retest #1</b>  |      | <b>Candidate signature &amp; acknowledgement,<br/>Retest #1</b>  |      |
| 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 |

Form DFS-HMT-SS-24

Approved by NJSME 02/27/19