



Fire Service Training
Oklahoma State University
1723 W. Tyler
Stillwater Ok 74078-8041
800-304-5727
Fax 405-744-7377

Training Records Request Form for Departments

I, the undersigned individual, do allow and request that my Chief Officer, _____ of _____ Fire Department, to research and copy my training records and transcripts from OSU/FST for the exclusive and express purposes of updating my training records. Please fill out the form completely and remember to allow at least one week for processing.

PRINT CLEARLY

Student Full Name: _____ Date of Birth: _____
MO DAY YEAR

E-Mail Required for both student and Chief Officer:

Student E-Mail:

Chief Officer E-Mail

Please check how the records are to be sent: Fax (If by fax please indicate the fax number)

Fax#: _____ Mail E-Mail

Name of Recipient: _____ Phone number: _____

Full Address: _____

City: _____ State: _____ Zip: _____

List all Previous Departments:

Signature: _____ Date: _____

(Your request cannot be processed without the signature of applicant and ID to verify)