KENTUCKY FIRE COMMISSION
STATE FIRE RESCUE TRAINING

KENTUCKY FIRE COMMISSION

118 James Court Lexington, Kentucky 40505

IN-HOUSE TRAINING ROSTER

Date:_____ Host Agency:_____ Location:_____

Lead Instructor (Print):_____ FIN:_____ Level: 1 2 3

Assisting Instructor (Print):_____ FIN:_____ Level: 1 2 3

Category	Class Name	Curriculum	Lesson Plan	Start	End	Method	Hours
						CR HO OL	
						CR HO OL	

FFN	LAST NAME	FIRST NAME	INITIALS	HOURS	

Instructor Signature:_____

DATE ENTERED:_____ ENTERED BY:_____