MICHIGAN BUREAU OF FIRE SERVICES

Fire Fighter Training Division

Request for Reciprocity Application

To request a review of certificates for reciprocity, the applicant must be employed by a recognized Michigan fire department and have been added to the SMOKE program.

Name:_____
(Last, First, M.I.) (Please print legibly)

Email: _____

SMOKE PIN:_____
(6 Digits)

RECIPROCITY LEVEL REQUESTED

Please Note: *Some certifications require a certificate in the previous level prior to granting reciprocity.*

- ☐ Fire Fighter I
- ☐ Fire Fighter II
- ☐ Fire Fighter I & II
- ☐ Hazardous Materials First Responder Operations
- ☐ Fire Officer I
- ☐ Fire Officer II
- ☐ Fire Officer III
- ☐ Fire Officer IV
- ☐ Fire Instructor I
- ☐ Fire Instructor II
- ☐ Fire Instructor III

Excerpt from Public Act 291 of 1966, Section 29.369 (amended January 31, 2018):

(6) The state fire marshal may waive the fire fighter examination requirements for a veteran who served in and is separated from the armed forces and provides a form DD214 or DD215 that demonstrates that he or she was separated from service with an honorable character of service or under honorable conditions (general) character of service, upon verification that the veteran completed firefighter training that meets the standards for fire fighter I and fire fighter II set forth in “Standard for Fire Fighter Professional Qualifications”, National Fire Protection Association standard no. 1001, while serving in the armed forces of the United States.

(7) Except as otherwise provided in this subsection, the state fire marshal shall waive the examination requirements under this section and extend reciprocity certification to a person from another state who seeks to become employed or volunteer in the fire service in this state if the person was certified in the other state after successfully completing a program that meets or exceeds the National Fire Protection Association standards for the applicable fire service discipline recognized under this act. The state fire marshal shall not waive the certification examination for a person who was certified in another state if either of the following applies:
(a) The person's out-of-state certification was revoked by that state or another issuing organization.
(b) The person has been convicted of a felony under the laws of this state, another state, or the United States.

I attest that I have not been convicted of a felony. Attached is the certificate(s) and a letter from the state of origin or accreditation organization that my certificate is in good standing.

Signature: _____ Date: _____

Fire Chief Signature:_____ Date: _____

Print a copy for your records. Copy, scan and email this application along with copies of qualifying certificates and supporting documents to: LARA-BFS-SMOKE@michigan.gov.

Questions may be directed to the appropriate region coordinator listed here:

Dan Hammerberg, Region 1 Coordinator
Phone: 906-399-4399
Email: hammerbergd@michigan.gov

T.J. Richardson, Acting Region 2 Coordinator
Phone: 517-285-6803
Email: richardsont14@michigan.gov