



REQUEST FOR RECIPROCITY APPLICATION

Michigan Department of Licensing & Regulatory Affairs
 Bureau of Fire Services, Fire Fighter Training Division
 P.O. Box 30700, Lansing, MI 48909
 Email: LARA-BFS-SMOKE@MICHIGAN.GOV

In accordance with Public Act 291 of 1966 as amended, this reciprocity application document shall be used to apply for reciprocity for the State's fire service disciplines.

Applicant Name:	SMOKE ID #:
Fire/Public Safety Department Name:	

If Applicable	
Pro Board ID PIN:	
IFSAC ID:	

Criminal History (Must be "No" to apply)	Yes	No
Have you ever been convicted of a felony within the United States?	<input type="checkbox"/>	<input type="checkbox"/>

General Requirements (All must be "Yes" to apply)	Yes	No
Currently a member or an employee of a recognized fire department or public safety department in Michigan.	<input type="checkbox"/>	<input type="checkbox"/>
Entered into the Bureau's training information network (SMOKE).	<input type="checkbox"/>	<input type="checkbox"/>

Reciprocity application method (Must have at least one "Yes" to apply)	Yes	No
Valid Pro Board® or IFSAC certificate, and Letter from issuing agency confirming the certificate is in good standing*	<input type="checkbox"/>	<input type="checkbox"/>
Another state's certifying agency certificate, and Letter from issuing agency confirming the certificate is in good standing*	<input type="checkbox"/>	<input type="checkbox"/>
Armed Forces of the United States certificate, and DD214 or DD215 showing honorably discharged, or If currently active, include Form BFS-258A	<input type="checkbox"/>	<input type="checkbox"/>
Fire Instructor Alternate Reciprocity Method (see below)	<input type="checkbox"/>	<input type="checkbox"/>

* Expired certificates will not be considered. Letter must be from the Issuing Agency, (not Pro Board or IFSAC), and include any disciplinary actions, suspensions, revocations, etc. against the applicant or their credentials now, in the past, or pending.

Discipline Specific Requirements:

Reciprocity may only be granted for those possessing, in good standing, the below requirements, at the time the certification is issued.

<input type="checkbox"/> Firefighter I with Hazardous Materials Operations, Firefighter II, and/or Firefighter I and II with Hazardous Materials Operations	Yes	No
Attached proof that you also meet: • NFPA 1001, "Fire Fighter Professional Qualifications"	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> Hazardous Materials First Responder Operations	Yes	No
Attached proof that you also meet: • NFPA 1072, "Standard for Competence of Responders to Hazardous Materials/Weapons of Mass Destruction Incidents"	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> Fire Instructor I, Fire Instructor II, and/or Fire Instructor III**	Yes	No
Attached proof that you also meet: • NFPA 1041, "Standard for Fire and Emergency Services Instructor Professional Qualifications"	<input type="checkbox"/>	<input type="checkbox"/>
To also be considered for <u>Certified</u> Instructor, eligible to teach MFFTC courses, you must also:		
○ Have attended and passed the Fire Instructor I Orientation (H04A or subsequent) course and	<input type="checkbox"/>	<input type="checkbox"/>
○ Include an application for instructor certification on appropriate level form(s) (BFS-209 – Probationary Instructor Application and/or BFS-211 – Instructor II Application)	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> **Fire Instructor Alternate Reciprocity Method	Yes	No
Attached proof that you possess either: • a valid teaching certificate from the Michigan Department of Education	<input type="checkbox"/>	<input type="checkbox"/>
• a valid Instructor Coordinator License through the Michigan Department of Health and Human Services EMS Division	<input type="checkbox"/>	<input type="checkbox"/>
• a valid M-410 certificate issued by the National Wildland Coordinating Group	<input type="checkbox"/>	<input type="checkbox"/>
Or attached proof that you have completed either:		
• a U.S. Department of Homeland Security instructor course	<input type="checkbox"/>	<input type="checkbox"/>
• a National Fire Academy instructor course	<input type="checkbox"/>	<input type="checkbox"/>
• a Federal Emergency Management Agency instructor course	<input type="checkbox"/>	<input type="checkbox"/>
To also be considered for <u>Certified</u> Instructor, eligible to teach MFFTC courses, along with your <i>Alternate Reciprocity Method</i> , you must also:		
○ Have attended and passed the Fire Instructor I Orientation (H04A or subsequent) course and	<input type="checkbox"/>	<input type="checkbox"/>
○ Include an application for instructor certification on appropriate level form(s) (BFS-209 – Probationary Instructor Application and/or BFS-211 – Instructor II Application)	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> Fire Officer I, Fire Officer II, Fire Officer III, and/or Fire Officer IV	Yes	No
Attached proof that you also meet:		
• NFPA 1021, "Standard for Fire Officer Professional Qualifications"	<input type="checkbox"/>	<input type="checkbox"/>
and		
• Fire Instructor I, or higher, (see above) qualifications	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> Fire Inspector I	Yes	No
Attached proof that you also meet:		
• NFPA 1031, "Standard for Professional Qualifications for Fire Inspector and Plan Examiner"	<input type="checkbox"/>	<input type="checkbox"/>
To become a <u>Certified</u> Inspector, afterwards (do <u>not</u> submit here) , you must also:		
○ Meet the requirements for fire inspector certification, as specified in Public Act 207 of 1941 , as amended	<input type="checkbox"/>	<input type="checkbox"/>
and		
○ Complete and submit the Bureau's State Certified Fire Inspector Application form (BFS-997) for certification as a Certified Fire Inspector	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/> Fire Investigator	Yes	No
Attached proof that you also meet:		
• NFPA 1033, "Standard for Professional Qualifications for Fire Investigator"	<input type="checkbox"/>	<input type="checkbox"/>

I attest that I have not been convicted of a felony within the United States and that the information provided in this application, and my SMOKE Profile, is complete, accurate and truthful at the time and date of signing.

Applicant's Signature _____
Date

I, _____ confirm that the above applicant is a
Fire Chief or Public Safety Director (printed)
member in good standing with this organization.

Fire Chief or Public Safety Director Signature _____
Date

Retain a copy for your records. Email this application, along with copies of qualifying certificates and supporting documents, to: LARA-BFS-SMOKE@MICHIGAN.GOV

Questions may be directed to:

Liam A. Carroll
Certification Specialist
Phone: (517) 242-1171
Email: CarrollL3@michigan.gov