

- Attach any copies of out-of-province IFSAC/Pro Board certificates (with seal number clearly visible).
- Submit completed applications to ma.certexam@gov.ab.ca.

Personal Information Legal name only — NO nicknames.

Legal Name: _____ Birthdate: _____
Last First Middle MM/DD

Email: _____ Contact Number: _____

City/Town: _____ Province/Territory: _____

Declaration

By signing this declaration, I confirm that I have read and will abide to the following statements:

- I have successfully completed IFSAC/Pro Board certification for NFPA 1041 Level II.
- I will not be involved with instructing the levels I will evaluate.
- I will not apply to evaluate or instruct any levels for which I am not qualified.
- I will not evaluate any person with whom I have a personal relationship.

I ensure that I have read the requirements specified by the Government of Alberta and that I will comply with these requirements. I understand that failure to follow these requirements may result in the suspension of privileges as an evaluator and proctor with the Government of Alberta.

Signature: _____ Date: _____

Office Use Only

Approved by: _____

Date: _____