2011 Training Information Form

For training received while serving as a volunteer firefighter

To accompany 2011 Oklahoma Volunteer Firefighter Tax Credit Form

Firefighter Name (please print) _____ (signature) _____

Firefighter Department (please print) _____

Course Title	Hours	Year	Where Taken	Instructor Name

Important Note: This form documents training hours completed for purposes of calculating tax credits applied for through COFT. Any questions regarding tax credit course equivalencies or OSU-FST credit and examination challenges should be directed to the Firefighter Coordinator at OSU-FST (800) 304-5727.