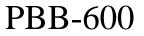


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> Texas Department of Agriculture Texas Prescribed Burning Board Application For Lead Burn Instructor



COMMISSIONER SID MILLER

	¹ APPLICANT INFORMATION							
	Mr. Mrs. Mrs.	First Name		M.I.	Last Name			
	Driver License Number		State		Date of Birth			
	² MAILING ADDRI	² MAILING ADDRESS						
	Address							
SECTION A	City			St	ate	Zip		
JCT	³ CONTACT INFO	³ CONTACT INFORMATION						
SF	Primary Phone			Secondary Phone (optional)				
	() - (() -				
	Cell Phone (optional)			Fax (optional)				
	() - () -				
	E-mail Address							
	informed of critical info communications. Failur	* I understand that my email a prmation, including licensing a re to provide an email address with state regulations, thereby,	nd regulato may result i	ry updates n my not i	; renewal invoices; and receiving time-sensitive	other important		

A birth date is mandatory and will be used to perform a criminal history evaluation in correspondence to Chapter 53 of the Occupations Code for each certification issued by the Board.

This document becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, 552.11765 and 559.004.)

	¹ EMPLOYMENT INFORMATION				
	Employer Name	Primary Phone			
			() -		
	² EMPLOYER'S MAILING ADDRESS				
N B	Address				
SECTION	City	State	Zip		
S	³ EMPLOYEE INFORMATION				
	Current Position/Job Title	Dates of Employment			
			o / /		
		month day year	month day year		
	Immediate Supervisor				

	¹ ADDITIONAL EXPERIENCE				
	How many total fires (both prescribed burns and wildfires) have you participated?				
С	On how many prescribed burns have you participated?				
ON	How many years of Prescribed Burning experience do you have?				
SECTI	On how many prescribed burns have you acted as the burn boss?				
	Have you passed or taught the board-approved Certified and Insured Prescribed Burn Manager training course?	Yes No			
	Are you a qualified NWCG Type II Burn boss?	Yes No			
	Are you a current Certified and Insured Prescribed Burn Manager in the State of Texas?	Yes No			

	¹ TRAINING (L	IST FIRE COURSES COMPLETEI	0)	
	Type of Course	Lead Instructor	Training Site	Date of Training
				/ / month day year
ON D				/ / month day year
SECTION				/ / month day year
				/ / month day year
				/ / month day year

	¹ TEACHING EXPERI	ENCE (MINIMUM OF 10)	
	Type of Course	Training Site	Date of Training
			/ /
			month day year
			/ /
			month day year
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			month day year
			/ /
Ъ			month day year
SECTION E			/ /
			month day year
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			month day year

¹ ADDITIONAL REQUIRED MATERIALS

Please provide the additional required documents attached to your Application (PBB-600)

Resume or CV

SECTION F

One lesson plan or sample of course materials

One burn plan of management scale, complete with one Post Burn Evaluation

List of references

رى	¹ DISCLOSURE OF PERSONAL INFORMATION ON PRESCRIBED BURNING WEBSITE						
NOIL	By che on the	ecking one or more of prescribed burning	of the boxe website.	s below, the app	blicant consents for	the follow	ing information to be released
SEC		Primary Phone		Cell Phone		Email	None of these

	¹ SIGNATURE	
SECTION H	The applicant, by and through their personal or agent's signature below (1 connection with this application at any time is true and correct to the best any misrepresentation or false statement made by the applicant, or an auth this application, whether intentional or not, will constitute grounds for der pursuant to this application and/or assessment of monetary administrative further acknowledges that this application may be denied and that any lice suspended, revoked, or denied renewal due to delinquency in payment of pursuant to this application may be suspended or denied renewal for failu (including employee) of the applicant, the person signing certifies that he certifications on behalf of the applicant.	of the applicant's knowledge; (2) acknowledges that horized agent of the applicant, in connection with nial, revocation, or non-renewal of any license issued penalties; and (3) if applying as an individual, ense issued pursuant to this application may be a guaranteed student loan and that any license issued re to pay child support. If signed by an agent
	Applicant Name (print)	Title
	Applicant Signature	Date / / month day year