

NH Statewide Entry Level Firefighter Examination
Candidate Physical Ability Test (CPAT)
APPLICATION PACKET



CPAT 2021

2021 CPAT ORIENTATIONS:

- Monday, April 19th and then Tuesday, April 20th
- Monday, May 17th and then Tuesday, May 18th
- Monday, June 7th and then Tuesday, June 8th

2021 CPAT TESTING DATES:

- Monday, April 19th and then Tuesday, April 20th
- Monday, May 17th, and then Tuesday, May 18th
- Monday, June 7th and then Tuesday, June 8th
- Monday, September 13th

LOCATIONS:

-April, May and June Test Dates-

Merrill Fay Ice Arena, 468 Province Rd Laconia, NH 03246

-September Date-

Richard M. Flynn Fire Academy, 98 Smokey Bear Blvd, Concord NH 03301

APPLICATION FORM / DEADLINE INFORMATION:

- In order for an applicant to be eligible to participate in the examination, the following items must be completed and signed:
 - 1. Application form**
 - Applicant must be 18 years or older
 - Applicant must have a high school diploma or GED
 - Applicant must provide a driver's license at the test date to prove identity
 - 2. Payment** received and processed
 - see fee information under "How to Submit Application" on next page
 - 3. Medical release form**
 - This form is only valid for 1 year from the date the physician signed the form, when used for the Candidate Physical Ability Test
 - 4. Online Consent forms** (mandatory for all candidates) and **Online Orientation** (mandatory only if taking physical Orientation)
 - These online links will be sent via email once all other components listed above have been submitted successfully.

- Applications received less than 30 days prior to the desired month of testing are not guaranteed a spot in that exam. Please plan accordingly.
- No application is considered complete until ALL items have been received, processed and verified.
- We assign test date and times based on the desired month you indicate on your application. We cannot accommodate specific time and date requests.
- We will start scheduling times a month before the scheduled test date. Please understand there will be a wait time, for example, if you apply in February for the June exam.

DEADLINE DATES FOR CPAT APPLICATION SUBMISSION:

April Exam Application Submission Deadline: Monday, April 5th
 May Exam Application Submission Deadline: Monday, May 3rd
 June Exam Application Submission Deadline: Monday, May 24th
 September Exam Application Submission Deadline: Monday, August 30th

If you submit your application after this date, you will be notified that you cannot test for that exam and offered one of the subsequent exams. Please note these deadlines are firm.

HOW TO SUBMIT APPLICATION: (accepted in person, by postal mail, by fax, or by ****email**)

Mailing address:	NH FST&EMS Entrance Exam 33 Hazen Drive, Concord, NH 03305	Accepting: Check
Deliver in person to:	Richard M. Flynn Fire Academy 98 Smokey Bear Boulevard Concord, NH 03301	Accepting: Check, Money Order, Credit Card, and Cash
Business Hours:	Monday – Friday, 8:00AM to 4:00PM	
Fax Number:	(603) 271-1091	Accepting: Payment made over phone
**Email:	fstems@dos.nh.gov **	or via mail (see above)
Phone Number:	(603) 223-4200	

****We do not accept credit card payment via email.** For your protection, the Department of Safety cannot take credit card information via email. We apologize for the inconvenience but we take security of your financial data seriously. Please note that email is an insecure means of transmitting your information and you should never use it to send your credit card number.

TESTING FEE:

- All applicants must remit a **\$275.00** non-refundable fee.

RETEST FEE:

- In the event of a failed attempt, a **\$75.00** non-refundable fee is due prior to the retest date.

RECIPROCITY FEE:

Those who have an out-of-state CPAT certificate and want their names to be put on the NH entry level firefighting eligibility list must submit the following:

1. Application Form
2. A copy of the CPAT certificate showing the date the test was taken and the IAFF license number.
3. A **\$60.00** processing fee.

FEE DELIVERY METHOD INFORMATION:

- The fee for the CPAT, Retest, and/or Reciprocity may be paid by personal check, money order, or credit card (Master Card, VISA, Discover or American Express). Credit Card payment may be made over the phone, or in person. Once any form of payment has been received and processed, the application is considered accepted, but scheduling of the exam will take place as listed above.
- Checks should be made payable to: **NH FST&EMS**

GENERAL INFORMATION:

- Candidates **MUST** follow the dress code for the physical ability testing:
"Throughout all events, the candidate must wear long pants and footwear with no open heel or toe. Watches and loose or restrictive jewelry are not permitted."
- **We assign candidate test date and times.** Your availability for the entire date/dates requested is extremely important. Applicants will be notified of their test date and time via email 30 days prior to test time, or once all necessary application materials have been submitted and approved.
- Link to information about State Entrance Testing on the FST & EMS website, including copies of the *CPAT Orientation Guide* and the *CPAT Preparation Guide & FAQs*. It is **STRONGLY RECOMMENDED** that you read and familiarize yourself with this webpage and all links thereupon.
<https://www.nh.gov/safety/divisions/fstems/facilities/testing/index.html>
- **QUESTIONS?** Contact: Scott Merrill at the NH Fire Academy (603-223-4285)
Email: scott.d.merrill@dos.nh.gov

Application for New Hampshire Statewide Entrance Examination

Applicant Basic Information

Last Name: _____ First Name: _____ Middle Initial: _____
 Sex: M F Date of Birth: _____
 Address _____ Last 4 digits of SSN#: _____
 City/Town _____ Active Military? Y N
 State _____ Cell Phone #: _____
 Zip _____ Email address #: _____
 Ethnicity: American Indian Asian African American or Black
 White Native American Hawaiian or Pacific Islander
 Hispanic Two or more Other

Applicant Certifications / Licenses / College Degree(s):

NH Firefighter Certifications:	National Registry EMS Certifications: (Check off licensed level)	Education & CDL license:
Firefighter I Y <input type="checkbox"/> N <input type="checkbox"/>	None <input type="checkbox"/>	CDL License? Y <input type="checkbox"/> N <input type="checkbox"/>
Firefighter II Y <input type="checkbox"/> N <input type="checkbox"/>	EMT <input type="checkbox"/>	High School Diploma/GED? Y <input type="checkbox"/> N <input type="checkbox"/>
Reciprocity application pending? Y <input type="checkbox"/> N <input type="checkbox"/>	AEMT <input type="checkbox"/>	College Degree(s)? Y <input type="checkbox"/> N <input type="checkbox"/>
	Paramedic <input type="checkbox"/>	Major: _____

Check-off your preferred month below; we will assign you a day & time as space is available.
 Participants in the CPAT test will be scheduled on a **“first-come, first-served”** basis, starting with the first date and earliest time available. A candidate’s testing date and time preference cannot be guaranteed. Confirmations will be sent 30 days prior to testing, presuming application is received prior to 30 days before the exam.

ORIENTATION:	APRIL <input type="checkbox"/>	MAY <input type="checkbox"/>	JUNE <input type="checkbox"/>	*No orientation for September CPAT.
CPAT (Select your first choice):	APRIL <input type="checkbox"/>	MAY <input type="checkbox"/>	JUNE <input type="checkbox"/>	SEPTEMBER <input type="checkbox"/> *limited spots*

NOTE: Applications received less than 30 days prior to the desired month of testing are not guaranteed a spot in that exam. Application Deadlines are firm. Please plan accordingly.

Your signature below authorizes the Division of Fire Standards and Training & EMS to release the results to all departments participating in the testing process and the International Association of Firefighters (IAFF) in accordance with the licensing agreement.

Applicant’s signature: _____ Date: _____

PAYMENT: Please indicate payment method below. \$275.00 fee is part of the application process. See page 2 of Packet for details on delivery methods.

Credit Card	Check / Money Order	Cash
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Reciprocity Checklist:	
For those who are requesting CPAT reciprocity: <input type="checkbox"/> ➤ Check the box to the right ➤ Copy of your out-of-state CPAT certificate ➤ \$60.00 CPAT reciprocity fee enclosed	OFFICE USE ONLY:

New Hampshire Department of Safety

Division of Fire Standards and Training & Emergency Medical Services

Mailing: 33 Hazen Drive, Concord, NH 03305

Physical: 98 Smokey Bear Boulevard, Concord, NH

Phones: (Toll free) 800-371-4503

(Local) 603-223-4200

(Fax) 603-271-1091

Medical Release Form

IMPORTANT! Though the medical release form can be submitted at any time, when used for entrance into a course, it cannot be older than three (3) years from the last day of class in which the student is enrolled. When used for CPAT, it cannot be older than one (1) year prior to the scheduled date of the CPAT test.

APPLICANT INFORMATION:

Name: _____	Last 4 digits of Social Security #: _____
Organization name: _____	Birth date: (mm/dd/yyyy) _____
Course Reference (CREF) #: (if applicable) _____	

DIRECTIONS: Only ONE of the sections below needs to be completed.

(A) FIRE DEPARTMENT SIGN-OFF:

NOTE: This section **MUST** be signed by the chief of the department or a designee. In addition, documentation from the applicant's physician or healthcare professional must be enclosed along with this form. (Examples: fit-for-duty sheet or signed letter on healthcare professional's letterhead)

I verify that the student listed above had a physical evaluation on _____ and has been determined to be fit for duty.

Printed Name: _____	Position or Rank: _____
Signature: _____	Date: _____
Official name of fire service organization: _____	

OR...

(B) HEALTH CARE PROVIDER SIGN-OFF:

NOTE: This section **MUST** be completed and signed by a physician or other licensed healthcare professional.

After referring to the "Essential Job Tasks and Student Activities", on page 2 of this form, I authorize the applicant listed above for full duty status by filling out the information below. (no other documentation required)

Printed Name: _____	
Signature: _____	
Date: _____	Phone: _____
Official Name of Healthcare Agency: _____	
Address: _____	

Appendix A-
Essential Job Tasks (NFPA 1582)and
Description of Student Activities

1. Performing firefighting tasks (e.g. hose line operations, extensive crawling, lifting, carrying heavy objects, ventilating roofs or walls using power or hand tools, and forcible entry), rescue operations and other emergency response actions under stressful conditions while wearing personal protective ensembles and self-contained breathing apparatus (SCBA), including working in extremely hot or cold environments for prolonged time periods.
2. Wearing an SCBA, which includes a demand valve-type positive-pressure face piece or HEPA filter masks, which requires the ability to tolerate increased respiratory workloads.
3. Exposure to toxic fumes, irritants, particulates, biological(infectious) and non-biological hazards, and/or heated gases, despite the use of personal protective ensembles and SCBA
4. Climbing six or more flights of stairs while wearing fire protective ensemble weighing at least 50 lbs. or more carrying equipment/tools weighing an additional 20 to 40 lbs.
5. Wearing fire protective ensemble that is encapsulating and insulated, which will result in significant fluid loss that frequently progresses to clinical dehydration and can elevate core temperature to levels exceeding 102.2 degrees F (39 degrees C).
6. Searching, finding and rescue-dragging or carrying victims ranging from newborns up to adults weighing over 200 lbs. to safety despite hazardous conditions and low visibility.
7. Advancing water-filled 2 ½ "diameter hose lines from fire apparatus to occupancy (approx.. 150'), which can involve negotiating multiple flights of stairs, ladders and other obstacles.
8. Climbing ladders, operating from heights, walking or crawling in the dark along narrow and uneven surfaces, and operating in proximity to electrical power lines and/or other hazards.
9. Unpredictable emergency requirements for prolonged periods of extreme physical exertion without benefit of warm-up, scheduled rest periods, meals, access to medication(s), or hydration.
10. Operating fire apparatus or other vehicles in emergency mode with emergency lights and sirens.
11. Critical, time-sensitive, complex problem solving during physical exertion in stressful, hazardous environments, including hot, dark, tightly enclosed spaces, that is further aggravated by fatigue, flashing lights, sirens, and other distractions.
12. Ability to give and comprehend verbal orders while wearing personal protective ensembles and SCBA under conditions of high background noise, poor visibility, and drenching from hose lines and/or fixed protection systems (sprinklers), hear alarm signals, hear and locate the source of calls for assistance from victims or other firefighters.
13. Functioning as an integral component of a team, where sudden incapacitation of a member can result in mission failure or in risk of injury or death to civilians or other team members.

A student will be required to wear fire protective clothing and SCBA in hazardous, but controlled atmospheres, perform firefighting and rescue operations that expose them to extreme heat, toxic products of combustion and hazardous materials. They will be required to lift and operate equipment and heavy machinery, carry and raise ladders, and climb ladders up to 100' in height. Students may achieve heart rates of 85 to 100% of their maximum capacity during training operations.