

MASSACHUSETTS MARITIME ACADEMY FIRE TRAINING SKILL EVALUATION SHEET

SOPHOMORE FIREFIGHTING

NAME: _____ **STUDENT ID:** _____

WRITTEN EXAM SCORE: _____ **GRADUATION DATE:** _____

LECTURE DATE: _____ **AND LECTURE CONTENT:**

P.P.E., Stages of Fire, Shipboard Fire Equipment and Fire Attack with Hose Lines

STATION

PASS/FAIL/INC

SCBA STATION:

- | | |
|---|-------------|
| A. Student demonstrates donning and doffing SCBA unassisted | [P] [F] [I] |
| B. Student demonstrates the ability to correctly change air cylinders | [P] [F] [I] |
| C. Student shows no problems or difficulties with all aspects of SCBA | [P] [F] [I] |
| D. Fail or Incomplete notations, Explain: | |
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SHIPBOARD FIRE PRACTICAL EXERCISE:

- | | |
|--|-------------|
| A. Students demonstrated participating in a fire attack. | [P] [F] [I] |
| B. Students will sounded proper alarm prior to fire attack. | [P] [F] [I] |
| C. Student was a nozzle operator and controlled and extinguished fire with an all purpose nozzle. | [P] [F] [I] |
| D. Student, as #2 on hoseline, demonstrated proper overhaul skills. | [P] [F] [I] |
| E. Student, as #3 on hoseline, maneuvered hoseline to maintain an uninterrupted flow of water. | [P] [F] [I] |
| F. Student demonstrated the proper use of their P.P.E. | [P] [F] [I] |
| G. The student demonstrated proper procedures for personal rehab. including hydration and proper cool down procedures. | [P] [F] [I] |
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FLAMMABLE LIQUIDS STATION:

A. Student selects proper extinguisher to fight a Class A & B fire. [P] [F] [I]

B. Student shows ability to protect teammates by using a safety hoseline. [P] [F] [I]

FLAMMABLE GAS STATION:

A. Student assists others in deploying 2 ½ inch hoselines to protect a fire team while shutting off the fuel supply to a pressurized liquid fire. [P] [F] [I]

B. Students displayed proper hose handling techniques while participating in activity listed in “A” above. [P] [F] [I]

C. Students displayed proper use of SCBA while participating in this exercise.[P] [F] [I]

This student has successfully completed the requirements for Sophomore Fire Training [Y] [N]

COMMENTS: _____

EVALUATOR: _____ DATE: _____

SIGNATURE: _____
