Florida Division of Forestry

Certified Burner’s Training Course

An Independent Study Course by Correspondence

This course is designed to train experienced individuals in public and private agencies and organizations that are charged with the responsibility of performing prescribed burns.
Session Dates

Fall 2010: September 1, 2010 – December 31, 2010

Course coordinator will set up FINAL EXAM after homework assignments are completed.

PLEASE MAIL REFISTRATION FORM AND PAYMENT TO:

Institute of Florida Studies
Hillsborough Community College
1206 N. Park Rd.
Plant City, FL 33563

MAKE CHECKS PAYABLE TO:
HILLSBOROUGH COMMUNITY COLLEGE

REGISTRATION FEE FOR THIS COURSE IS $175.00

Course Goals

By sponsoring the voluntary certification program, the Florida Division of Forestry expects to achieve the following:

1. Better quality prescribed burning throughout the state.
2. Reduced likelihood of accidents occurring from smoke on highways.
3. Ability to preserve the practice of prescribed burning without stricter rules and regulations.
4. Provide additional consideration to certified prescribed burner’s when granting the authorizations to burn.

Course Objectives

It is not the objective of this program to teach basic prescribed burning skills, but to certify that skilled individuals can demonstrate this knowledge and have pledged that they will use recommended procedures. This program will provide the requirements for the course completion step of certification. DOF District personnel must pass it before certification review and recommendation.

Therefore, only those individuals who indicate that they have direct experience (not standby) in three or more prescribed burns to accomplish forest, wildlife management, range or ecological management purposes will be accepted as applicants.

Information, contact: Donna Lewis 813-757-2207  dlewis1@hccfl.edu
Florida Division of Forestry Application

Please complete the application form and return, with registration form, to Hillsborough Community College, Institute of Florida Studies. Please be thorough in completing this form as the information you provide will determine whether or not you will be accepted as a participant in the Certified Burner’s Course.

Name________________________________________________________________
Address______________________________________________________________
City, State, Zip_________________________________________________________
Employer_____________________________________________________________
Type of Business________________________________________________________
Phone, Home___________________________________________________________
Phone, Business_________________________________________________________

Have you ever received an authorization from DOF? ______yes _______no  If yes, regularly? ____
Have you ever prepared a written prescribed burning plan? ______yes ______no
List dates for prescribed burns within the past 12 months in which you have actively participated.
List type of burn:

<table>
<thead>
<tr>
<th>DATE</th>
<th>TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In what counties of Florida have you had experience burning? __________________________________________
What formal training courses have you taken and when? _______________________________________________

In how many prescribed burns have you directly participated? (circle one)

A. 0   B. 1-2   C. 3-10   D. 11-25   E. 26-50   F. More than 50

* A minimum of 3 burns are required.