



## Louisiana Fire & Emergency Training Academy Certification Division

6868 Nicholson Drive • Baton Rouge, LA 70820  
225-334-6282 (o) 225-334-6065 (f)

### Louisiana Duplicate Certificate Application Form

Date Processed

Processed By

Certificate Code

* First Name	* Middle Name or Initial	* Last Name	
* Address		Apt/Lot #:	
* City		* State	* Zip Code
* Phone Number		* Other Number (i.e., cell phone)	
* Last 4 digits of SSN	* DOB (MM/DD/YYYY)	* Email Address	

* Select Levels (\$20.00 per certificate level requested):								
#1	Std Yr	Level	#2	Std Yr	Level	#3	Std Yr	Level
<input type="checkbox"/>		Hazmat Awareness	<input type="checkbox"/>		Telecommunicator II	<input type="checkbox"/>		Fire Instructor III
<input type="checkbox"/>		Hazmat Operations	<input type="checkbox"/>		Rope Rescue I & II	<input type="checkbox"/>		IFB-Incipient
<input type="checkbox"/>		Hazmat Technician	<input type="checkbox"/>		Confined Space I & II	<input type="checkbox"/>		IFB-Advanced Exterior
<input type="checkbox"/>		Hazmat Incident Command	<input type="checkbox"/>		Fire Officer I	<input type="checkbox"/>		IFB-Interior Structure
<input type="checkbox"/>		Firefighter I	<input type="checkbox"/>		Fire Officer II	<input type="checkbox"/>		Incident Safety Officer
<input type="checkbox"/>		Firefighter II	<input type="checkbox"/>		Fire Officer III	<input type="checkbox"/>		Public Fire Educator I
<input type="checkbox"/>		Firefighter III	<input type="checkbox"/>		Fire Officer IV	<input type="checkbox"/>		Public Fire Educator II
<input type="checkbox"/>		ADO Pumper	<input type="checkbox"/>		Fire Inspector I	<input type="checkbox"/>		Other:
<input type="checkbox"/>		ADO Aerial	<input type="checkbox"/>		Fire Inspector II	<input type="checkbox"/>		Other:
<input type="checkbox"/>		ADO Mobile Water Sup.	<input type="checkbox"/>		Fire Investigator	<input type="checkbox"/>		Other:
<input type="checkbox"/>		Airport Firefighter	<input type="checkbox"/>		Fire Instructor I	<input type="checkbox"/>		Other:
<input type="checkbox"/>		Telecommunicator I	<input type="checkbox"/>		Fire Instructor II	<input type="checkbox"/>		Other:

**Total levels checked:** \_\_\_\_\_ X \$20.00 = \_\_\_\_\_ **Total Amount Due**

**Method of Payment:**

Check or money order, payable to LASFM

Credit card (for security purposes, we will contact you by phone to obtain card information)

**Return form and payment in person or to the mailing address at the top of this form.**

**LFETA Administration Only**

Approved by: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date logged into Certificate Registry: \_\_\_\_\_ Date Certificate(s) Mailed: \_\_\_\_\_

Revised: 1/2022