



# Fire Prevention Officers' Association of British Columbia

## Registration Procedures NFPA 1033

This is a self-paced course and can be started once registration and payment is completed. Students will have from the date of registration, 5 (five) calendar months to complete the online portion of the course material. If an extension is needed it may be approved by the FPOABC ProBoard Certification Coordinator.

Fill out the course application forms, as listed here:

- Confirmation of Employment or Membership (FPOA 036)
- Consent to Release Information Employer (FPOA021)
- Consent to Release Information to Pro Board (FPOA022)
- Candidates Registration Information Form (FPOA042)
- Payment

Submit registration documents either by email (*preferred*) to 1033info@fpoa.bc.ca, by fax to 250-591-2850, or by regular mail to 1033 Registration, 2286 Kingsford Place, Nanaimo, BC, V9X 1Y3

### Course Prices

NFPA 1033 Full Fire Investigator Course \$1500.00

**You may request an invoice to be sent to you – invoices may be paid online via credit card on our secure server, or by cheque – payable to the Online Learning Centre – and mailed to:**  
FPOABC ProBoard Certification Coordinator, 2286 Kingsford Place, Nanaimo, BC, V9X1Y3

Receipts are available on request.

### COMPLETING THE COURSE:

When registration is complete, you will be issued a username and password (by email) to begin the online, Requisite Knowledge portion of the course.

Once the student has completed the online part of the course, we are automatically notified and an Evaluator will be assigned by the FPOABC ProBoard Certification Coordinator. The Cognitive Test and the Practical Examination must be taken within 21 (twenty-one) days from the date that the student receives their evaluation notice via email, unless an extension is approved by the FPOABC ProBoard Certification Coordinator.

Once the Cognitive Test is marked and the Evaluator returns the completed Practical Evaluation check-sheet and related documentation, Students will be notified via email whether they have passed or failed.

Any student requiring a re-examination, Cognitive Test and/or Practical Exam, must complete the re-examination within 21 days of receiving notification of their initial examination marks, unless approved by the FPOABC ProBoard Certification Coordinator.



## Fire Prevention Officers' Association of British Columbia

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### Resource Materials (OG#031)

The following are required for the course:

- **FPOABC 1033 Fire Investigation Manual.** This manual is supplied via email at the time of registration prior to student commencing the online, Requisite Knowledge Section of the course.
- **NFPA 921: Guide for Fire and Explosion Investigations. This manual will be made available online during the course.**

### Prices and Cost Comparison

The Fire Prevention Officers' Association is very proud to offer the first online **ProBoard Accredited NFPA 1033 Fire Investigation Course!** Our goal is to offer the highest quality of training to the Fire Investigation Community at the most reasonable price.

### Course Prices

#### **NFPA 1033 Full Fire Investigator Course \$1500.00**

In the past, taking the Certified Fire Investigation Course through **conventional** means involved having to leave work for approximately 12 to 15 days, with all of the associated costs - not only tuition, but hotels, meals, travel, and any replacement staffing while absent - you could easily spend **\$12,000.00**.

For the Requisite Knowledge portion, our accredited course gives you the opportunity to work from home or office, at your speed and convenience.

Once you have completed that portion of the course, you will require only one day away from the office for the Examination portion. Using our format, we estimate a **SAVINGS** of approximately **\$10,000.00 per person**.

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# Fire Prevention Officers' Association of British Columbia

NFPA 1033: Standard for Professional Qualifications for Fire Investigator

## Consent to Release Information to Employer

I, \_\_\_\_\_,

*Print Name in Full*

hereby consent to allowing Fire Prevention Officers' Association of BC to release to my employer my test results, Statement or Certificate Of course Completion and verification of attendance in connection with this course. I understand that my consent is required prior to release of the specified information.

Employer's Name: \_\_\_\_\_

Employer Contact: \_\_\_\_\_

Employer's Address:  
PLEASE PRINT FULL NAME

\_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(Province)

\_\_\_\_\_  
(Postal Code)

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

**This form is only required to be filled out by students when an employer is paying for the course.**



# Fire Prevention Officers' Association of British Columbia

NFPA 1033: Standard for Professional Qualifications for Fire Investigator

## Consent to Release Information to Pro Board

### Registration & Consent Form

*(Please print legibly)*

Course Name: \_\_\_\_\_ Course Date(s) \_\_\_\_\_

### Personal Information:

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City Province Postal Code

Phone #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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## **Consent to Release Information to Pro Board**

I hereby consent to allowing the Fire Prevention Officers' Association of BC to release the following information to National Board on Fire Service Professional Qualifications – Pro Board for the purpose of being registered with the Pro Board Certification Registry:

***Last 4 digits only*** of your  
Social Insurance Number: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



# Fire Prevention Officers' Association of British Columbia

NFPA 1033: Standard for Professional Qualifications for Fire Investigator

## FPOABC NFPA 1033 Confirmation of Employment or Membership

### Applicant:

Name: \_\_\_\_\_, Date: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_, Phone: \_\_\_\_\_

Job or Title: \_\_\_\_\_

**This form is to provide a Confirmation of Employment or Membership reference for the above-named applicant.**

### Reference:

Name: \_\_\_\_\_, Date: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_, Phone: \_\_\_\_\_

Year Known Applicant: \_\_\_\_\_  Professional  Personal

Job or Title: \_\_\_\_\_

By signing this document, I confirm that the Applicant named above is employed by, or is a member of, a professional fire prevention division, department, organization, or company.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
*Print Name* *Signature* *Date*

### **Comments:**

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