



Mt. San Antonio College

Public Safety Programs

WILDLAND FIRE ACADEMY APPLICATION

1100 N. Grand Avenue, Walnut, CA 91789

Application must be typed

Last Name: _____ First Name: _____ M.I. _____

Address: _____
Number Street City State Zip Code

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Email: _____

Male Female Mt. SAC Student ID#: _____

I certify that the above information is correct to the best of my knowledge.

Signature: _____ Date: _____

Items required on separate sheets of paper:

- Medical Insurance Verification Form
- Copy of Medical Insurance Card
- Copy of EMT Card (If applicable)
- Course Verification: Once you have secured ALL of the items above, Michelle Navarro in the Public Safety Programs office in building 28B, room 208, must verify your academic requirements. You can request course verification by emailing Michelle Navarro at mnavarro62@mtsac.edu. Additional information will be provided via email.

OFFICE USE ONLY:

Requirements	Grade	Units	Sem/Yr	College	Comments
<input type="checkbox"/> Fire 1					
<input type="checkbox"/> WFT 101					
<input type="checkbox"/> WFT 102					
<input type="checkbox"/> WFT 103					
<input type="checkbox"/> WFT 104					
<input type="checkbox"/> WTEC 105					
<input type="checkbox"/> KINF 51/52					
<input type="checkbox"/> EMT					

Verified By: _____ Date: _____

Signature: _____