

Date Received	<b>Texas Commission on Fire Protection Fire Service Standards &amp; Certification Division</b>	Date Approved
Certification No. Discipline Code		Approved By
	Mail application to: P.O. Box 2286, Austin, Texas 78768-2286 (512) 936-3838 FAX (512) 936-3808	
	<b>Application for Certification</b>	

Certification fees are **NON-REFUNDABLE**. The \$85.00 fee submitted for certificates not issued will not be returned. There is an \$85 fee for EACH certificate and/or level requested. Fill out applicable sections only.

**\*\*\*IMPORTANT\*\*\* YOU ARE REQUIRED TO SUBMIT FINGERPRINT DATA FOR A CRIMINAL HISTORY CHECK IF EITHER OF THE FOLLOWING SITUATIONS APPLY TO YOU:**

- YOU HAVE NOT BEEN APPOINTED TO FIRE PROTECTION DUTIES WITH A COMMISSION-REGULATED ENTITY, AND DO NOT HOLD AN ACTIVE CERTIFICATION WITH THE TEXAS COMMISSION ON FIRE PROTECTION.
- YOU WERE APPOINTED TO FIRE PROTECTION DUTIES WITH A COMMISSION-REGULATED ENTITY PRIOR TO JANUARY 1, 2010, BUT YOU DO NOT YET HOLD AN ACTIVE CERTIFICATION.

**SEE THE APPLICATION INSTRUCTION PAGES FOR HOW TO SUBMIT FINGERPRINT DATA.**

<b>Personal Information:</b>				
Social Security No. or PIN	Last Name	Suffix	First Name	Middle Name or Initial
	Sanchez		Eric	lee
Home Address of Applicant		City	State	Zip Code
1110 E. 10th		San Juan	Tx	78589
Daytime/Cell Phone Number		Email Address		
(956)225-3361		eric.sanchez@co.hidalgo.tx.us		

<b>Current Department Information (employed individuals only):</b>			
FDID No.	Department Name	Station # or Division	Work Phone
24	Hidalgo County Fire Marshals Office	Investlgations	(956)318-2656

<b>Please supply the following information if you do not hold an active certification with the Texas Commission on Fire Protection at this time:</b>					
Previously Used Last Names List all aliases, including maiden name, if applicable.		Previously Used Suffixes	Previously Used First Names	Previously Used Middle Names or Initials	
Driver's License No.	D.L. State	Height (Feet/Inches)	Weight (Pounds)	Hair Color	Eye Color
	Tx	5-10	160	BRO	BRO
Date of Birth	Sex	Race or Ethnicity			
12/03/1981	<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Black	<input checked="" type="checkbox"/> White (includes Hispanic)	<input type="checkbox"/> Other: _____	
High School Diploma?	If no, highest grade completed	GED?	College Degree?	If Degree, what major?	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Have you ever been convicted of any criminal offense other than minor traffic offenses?					
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, attach explanation regarding the date of conviction, original charge, jurisdiction, disposition, and circumstances surrounding the offense.					

**Certification Applied For:** Please check all areas that apply and supply all documentation required. Submit the **NON-REFUNDABLE \$85.00** certification fee for each certificate applied for. Incomplete applications and insufficient documentation will result in application being denied.

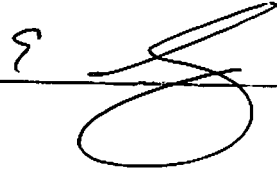
Structure Fire Protection	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
<i>For Basic Structure Fire Protection only:</i> Check type of documented medical training attached, plus license or registration number if applicable	<input type="checkbox"/> (Texas) DSHS Number:	<input type="checkbox"/> NREMT Number:	<input type="checkbox"/> Other Attach course completion certificate	
Aircraft Rescue Fire Protection	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Marine Fire Protection	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Fire Inspector	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Arson Investigator	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Fire Investigator	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Fire Service Instructor	<input type="checkbox"/> Level I	<input type="checkbox"/> Level II	<input type="checkbox"/> Level III	<input type="checkbox"/> Level III - Master
Fire Officer	<input type="checkbox"/> Fire Officer I	<input type="checkbox"/> Fire Officer II	<input type="checkbox"/> Fire Officer III	<input type="checkbox"/> Fire Officer IV
Hazardous Materials	<input type="checkbox"/> Technician		<input type="checkbox"/> Incident Commander	
Driver/Operator - Pumper	<input type="checkbox"/> Basic			
Wildland Fire Protection	<input checked="" type="checkbox"/> Basic		<input type="checkbox"/> Intermediate	
Incident Safety Officer	<input type="checkbox"/> Basic			

TEXAS  
FIRE PROTECTION  
COMMISSION

Disclosure of your social security number is required. Your social security number is being solicited pursuant to Texas Family Code, §231.302 for use by the State's Title IV-D agency to assist in the administration of laws relating to child support enforcement under Parts A and D of Title IV of the Federal Social Security Act (42 U.S.C. §601-617 and §651-669).

It is the policy of this agency that all applicants will receive an equal opportunity without regard to race, color, age, religion, sex, national origin, or physical/mental disability unless the individual does not meet the standards set by the commission as stated in the Standards Manual for Fire Protection Personnel, "Standards for Certification, §421.3."

By my signature below, I attest I have read and agree that the statements on this form and any attachments to this form are true and correct. I understand any misstatements or omissions of material facts may constitute grounds for administrative proceedings by the T.C.F.P.

Signature of Applicant: 

Date: 08.28.13

TCFP-002 R10  
06/20/2013

Agency Use	
Control No.	Rev. Code 70



# Texas Commission on Fire Protection

In the interest of protecting the citizens of Texas,  
the commission awards this certificate to

## Eric Lee Sanchez

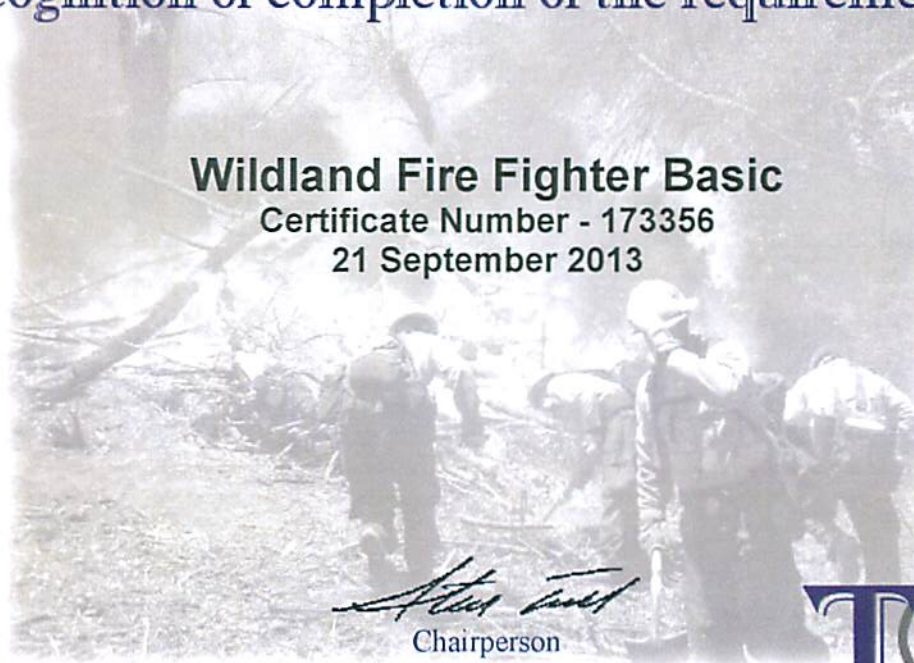
PIN: 22174

In recognition of completion of the requirements for

**Wildland Fire Fighter Basic**

Certificate Number - 173356

21 September 2013



*Attilio Turchi*  
Chairperson

*Eric Lee Sanchez*  
Executive Director



Date Received	<b>Texas Commission on Fire Protection Fire Service Standards &amp; Certification Division</b>	Date Approved
Certification No. Discipline Code		Mail application to: P.O. Box 2286, Austin, Texas 78768-2286 (512) 936-3838 FAX (512) 936-3808
<b>Application for Certification</b>		

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<b>Personal Information:</b>				
Social Security No. or PIN	Last Name	Suffix	First Name	Middle Name or Initial
	Casas		Rolando	
Home Address of Applicant		City	State	Zip Code
425 W 12th St.		San Juan	Tx	78589
Daytime/Cell Phone Number		Email Address		
956-342-6150		rolando.casas@co.hidalgo.tx.us		

<b>Current Department Information (employed individuals only):</b>			
FDID No.	Department Name	Station # or Division	Work Phone
24	Hidalgo County Fire Marshals Office	Investigations	956-318-2656

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Date of Birth	Sex	Race or Ethnicity			
	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Black	<input type="checkbox"/> White (includes Hispanic)	<input type="checkbox"/> Other: _____	
High School Diploma?	If no, highest grade completed	GED?	College Degree?	If Degree, what major?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of any criminal offense other than minor traffic offenses?					
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Fire Inspector	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Arson Investigator	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
Fire Investigator	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced	<input type="checkbox"/> Master
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Fire Officer	<input type="checkbox"/> Fire Officer I	<input type="checkbox"/> Fire Officer II	<input type="checkbox"/> Fire Officer III	<input type="checkbox"/> Fire Officer IV
Hazardous Materials	<input type="checkbox"/> Technician		<input type="checkbox"/> Incident Commander	
Driver/Operator - Pumper	<input type="checkbox"/> Basic			
Wildland Fire Protection	<input checked="" type="checkbox"/> Basic		<input type="checkbox"/> Intermediate	
Incident Safety Officer	<input type="checkbox"/> Basic			

*Handwritten notes:*  
 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

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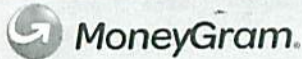
Signature of Applicant: *Richard Lopez*

Date: 8/20/2013

TCFP-002 R10  
06/20/2013

|             |              |
|-------------|--------------|
| Agency Use  |              |
| Control No. | Rev. Code 70 |

Valid Money Order includes: 1. Heat sensitive, red stop sign AND 2. Contains a True Watermark hold up to light to view.



INTERNATIONAL MONEY ORDER 86-186 1031

08/27/2013

To Validate: Touch the stop sign, then watch it fade and reappear



20519820154  
MONEY ORDER - WM

\*\*\*85.00\*\*\*  
EIGHTY-FIVE \*\*\*\*  
DOLLARS 00 CENTS

PAY EXACTLY

PAY TO THE ORDER OF:/  
PAGAR A LA ORDEN DE:

Texas Commission on Fire Protection  
IMPORTANT - SEE BACK BEFORE CASHING

*Roberto Escobar*  
PURCHASER, SIGNER FOR DRAWER / COMPRADOR, FIRMA DEL LIBRADOR  
PURCHASER, BY SIGNING YOU AGREE TO THE SERVICE CHARGE AND OTHER TERMS ON THE REVERSE SIDE

ADDRESS:/  
DIRECCION:

425 W. 12th, San Juan, TX. 78589

Payable Through  
BOKF, NA  
Enid, OK

ISSUER/DRAWER:  
MONEYGRAM PAYMENT SYSTEMS, INC.

60528516569165  
1937400239141154

MONEY ORDER NUMBER  
R205198201549

CALL 1-800-542-3590 TO VERIFY

⑆103101864⑆205198201549⑈90

MoneyGram.

R205198201549

698 (12/12) 500/5000  
M 70955-U

EMPLOYEE

20519820154 08/27/2013  
141 NN \$85.00  
60528516569165 00  
RECEIPTO RECIBO

KEEP A COPY OF THIS STUB FOR YOUR RECORDS/  
MANTENGA UNA COPIA DE ESTE RECIBO PARA SUS ARCHIVOS

PLEASE READ REVERSE SIDE [www.moneygram.com/moneyorder](http://www.moneygram.com/moneyorder) DATE/AMOUNT

MONEYGRAM PAYMENT SYSTEMS, INC. DRAWER  
P.O. BOX 9476  
MINNEAPOLIS, MN 55480

MoneyGram.

R205198201549

698 (12/12) 500/5000  
M 70955-U

EMPLOYEE

20519820154 08/27/2013  
141 NN \$85.00  
60528516569165 00  
RECEIPTO RECIBO

KEEP A COPY OF THIS STUB FOR YOUR RECORDS/  
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PLEASE READ REVERSE SIDE [www.moneygram.com/moneyorder](http://www.moneygram.com/moneyorder) DATE/AMOUNT

MONEYGRAM PAYMENT SYSTEMS, INC. DRAWER  
P.O. BOX 9476  
MINNEAPOLIS, MN 55480

# Texas Commission on Fire Protection

In the interest of protecting the citizens of Texas,  
the commission awards this certificate to

## Rolando Casas

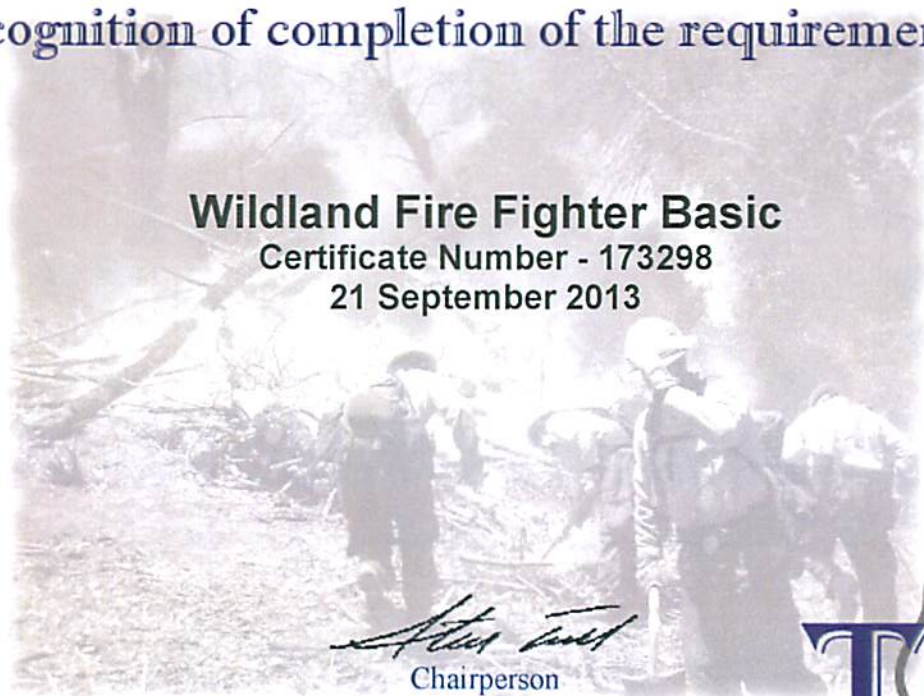
PIN: 9344753

In recognition of completion of the requirements for

**Wildland Fire Fighter Basic**

Certificate Number - 173298

21 September 2013



*Ates Tost*  
Chairperson

*[Signature]*  
Executive Director

