



Certified Emergency Services Commissioner Application



Name: _____

Affiliation: District, Dept. or Firm: _____

Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Email: _____

I have completed the requirements below:

- Completion of at least two years as an ESD commissioner.
- Be a member of SAFE-D at the time of application and during the time the 25 hours of training outlined below are completed.
- Be current on the required minimum training hours as specified in Chapter 775.0365 of the Texas Health & Safety Code.
- Attendance at a minimum of one SAFE-D Annual Conference during the preceding two years of service as an ESD commissioner. Year(s) Attended: _____
- Completion of a minimum of 25 hours of accredited, SAFE-D-provided ESD commissioner training including but not limited to:
 - ESD 101 (3 hours)
 - Ethics course (at least 1 hour)
 - Strategic Planning course (at least 1 hour)
 - Records Retention/Management course (at least 1 hour)
 - Roberts Rules course (at least 1 hour)
 - Financial Reporting course (at least 1 hour - ESD 203, ESD 205)
- Proof of timely submission of the candidate's ESD audit reports during the time of applicant's service as an ESD Commissioner.

Signature: _____ Date: _____

Please mail my certificate to the above address

Or indicate where you'd like your certificate to be sent:

Address: _____

City/State/Zip: _____

RETURN COMPLETED APPLICATION TO: SAFE-D
P.O. Box 676
Pflugerville, TX 78691
Fax: 512-251-8152
(p) 512-251-8101 • safed@texas.net • www.safe-d.org