



**Protection and Emergency Services
APPLICATION FOR PROVINCIAL COURSES**

Course #	Course Title	Dates	Location

Last Name	First Name	Home Number	Work Number
Organization			Fax Number
Title			
Mailing address		* Completion date of BEM (if applicable)	
E-Mail Address:		** Completion date of ICS 100 (if applicable)	
(course confirmation is e-mailed)		*** Completion date of other (if applicable)	

Organization authorization to attend course:

Signature

Title

Complete and return form to:

**Office of the Fire Commissioner
310 - 1855 Victoria Avenue
Regina, SK S4P 3T2
Fax: (306) 787-7107
Phone: (306) 787-2688**

** Basic Emergency Management (BEM) is a prerequisite for advanced Emergency Management training.*

*** ICS 100 is a prerequisite for advanced Incident Command System training.*

**** Other prerequisites as specified in course descriptions.*