



Southern Stone County Fire Protection District Sign-In Form

Training or Activity

Date: _____ Start Time: _____ End Time: _____

Location: _____

District-Wide Battalion # _____ Station # _____ Shift _____

Special Teams/Groups: Marine Tech Rescue Cadets Honor Guard Officer

Type of Training: Fire Medical Rescue Other Apparatus Checks

Subject(s): _____

Instructor(s): _____

Apparatus Used: _____

Water Used? _____ (Approx. Gals.) Water system: _____

Type of Activity: Station Maintenance Public Relations/Education

Meeting Other _____

Description of Training/Activity:

<u>Print Name</u>	Radio #	✓ CEU	<u>Print Name</u>	Radio #	✓ CEU
1			16		
2			17		
3			18		
4			19		
5			20		
6			21		
7			22		
8			23		
9			24		
10			25		
11			26		
12			27		
13			28		
14			29		
15			30		