



# Construction Site Fire Safety Management Training (CSFSM)

**CEUs: 0.8**

**COURSE DESCRIPTION:**

This course introduces students to the New York City Fire Code and Fire Department Rules including their organization and terminology, along with Fire Code construction site provisions and all construction site fire safety requirements. Topics covered will include Fire Safety Plans, inspections and record keeping, Training on fire extinguishers, testing fire protection equipment, hot work requirements and industry best practices based on other regulatory requirements like the Building Code and OSHA.

**LEARNING OUTCOMES include:**

- Evaluate Fire Department reference material, including the S-56 Certificate of Fitness Study Guide, to stay current with the New York City Fire Code.
- Identify rules and regulations that were promulgated after serious fires in New York City.
- Determine New York City specific fire safety issues.
- Prescribe control measures for New York City fire safety issues
- Choose safe work methods, including best practices for fire safety at their construction sites to prevent fires.
- Pass the school end-of-course examination on the basis of having successfully completed the CSFSM course.

**COURSE COMPLETION:**

Students are required to complete 100% of the course and actively participate in all learning activities including hands-on demonstrations, review quiz and final exam. Students must receive a minimum passing score of 70% on the 50-question multiple-choice exam to receive the course completion certificate and verification letter.

**HOW TO REGISTER**

**ONLINE:** Please visit [www.tscta.com](http://www.tscta.com)

**EMAIL:** Send completed form to [info@tscta.com](mailto:info@tscta.com)

**FAX:** Send completed form to 718-389-6155

**COURSE FEES** are due in full in order to be eligible to receive course completion materials. Fees include cost of all training materials.

- Individual Course Fee: **\$245.00 per participant**
- For 4 to 5 attendees: **\$220.50 per participant**

**ACCEPTED FORMS OF PAYMENT:**

- Cash
- Credit card (see form below)
- Money order/certified check
- Check (7 day hold for release of materials)

<b><u>SELECT DISTRIBUTION OPTION</u></b>	
<input type="checkbox"/>	Release Materials to the student after class; OR
<input type="checkbox"/>	Mail materials to company address

**REGISTRATION, CANCELLATION & ATTENDANCE POLICY**

Seating will not be reserved without completed registration form and payment. After registration, confirmation will be provided by fax, email or printed copy. **Registration forms sent in to office after 5 PM will be processed the following business day.**

**ATTENDANCE:** TSCTA requires 100% attendance to satisfy course requirements. Students must arrive no later than 30 minutes after start of training to be admitted.

**CANCELLATION** or rescheduling requests will be accepted with no penalty at least 3 business days prior to training start date. Failure to provide adequate notice may result in forfeiture of deposit. Registrations made less than 3 days before event start date will not be eligible for a refund. No cash refunds will be issued. TSCTA reserves the right to reschedule or cancel any course date(s) for any reason, including insufficient enrollment. To view TSCTA's registration, refund, classroom, privacy and non-discrimination policies, please visit [www.tscta.com](http://www.tscta.com).

## Registration Form (Please Print)

**SECTION 1**

CLASS DATE: \_\_\_\_\_

LANGUAGE: \_\_\_\_\_

**SECTION 2**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME # \_\_\_\_\_ CELL# \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

EMAIL \_\_\_\_\_

**SECTION 3**

COMPANY/SPONSOR NAME \_\_\_\_\_

COMPANY CONTACT \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

WORK# \_\_\_\_\_ FAX# \_\_\_\_\_



# Credit Card Authorization Form

NOTE: One form can be used for multiple registrations

Phone: 718.389.2103

Fax: 718.389.6155

Email: info@tscta.com

Website: www.tscta.com

		<b>CREDIT CARD ON FILE</b>	
<i>Card holder name</i>		<input type="checkbox"/> CHECK THIS BOX TO AUTHORIZE TSCTA TO SAVE YOUR CREDIT CARD INFO ON FILE FOR ALL FUTURE TRAINING BALANCES ON YOUR ACCOUNT. A CREDIT CARD RECEIPT WILL BE EMAILED TO YOU EACH TIME A CHARGE IS MADE.	
<i>Company Name (if applicable)</i>			
<i>Street Address</i>		<b>RELEASE OF MATERIALS</b>	
<i>City</i>	<i>State</i>	<i>Zip</i>	
<i>Phone</i>		<input type="checkbox"/> RELEASE COMPLETION MATERIALS DIRECTLY TO STUDENTS AT THE END OF COURSE (IF AVAILABLE).  <input type="checkbox"/> MAIL COMPLETION MATERIALS TO ADDRESS	
<i>Name of person preparing form (if different than card holder)</i>			

BREAKDOWN OF CHARGES				
Date of Training	Course Name	# of Students	Fee Per Student	Total
Total Amount to be charged				

I, \_\_\_\_\_ hereby authorize TSC Training Academy, LLC to charge the below credit card for the authorized amount. I have read and reviewed TSC's cancellation and deposit policy and agree to the terms as written. I understand that failure to provide three (3) days advance notification of registration cancellation may result in forfeiture of deposit payment (s). Further, no course completion material (s) will be released until ALL account balances have been paid in full.

## CREDIT CARD DETAILS

VISA     
  MASTERCARD     
  AMEX     
  DISCOVER

Card No: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Verification Code: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

Date: \_\_\_\_\_