Fairfield County Fire Service

l,	, Chief of	_ Fire
Department, do hereby verify		_ is a member
of the above department, and has my permission to attend the South Carolina		
Fire Academy's 1210 (Emergen	cy Vehicle Drivers Training) course.	

I am also aware that I may need to provide a vehicle for my student to drive and perform course skills, if this program is outside of Fairfield County.

Chief Signature