"FIT FOR DUTY"
VERIFICATION FORM

NEAFC SAFER Grant Program: 12/23/2025 - 12/22/2029

DATE: _____

The medical office of _____ has provided the necessary examination of firefighter, _____ in accordance with NFPA 1582 guidelines.

Our office finds this firefighter: "**FIT FOR DUTY"**

Examiner's Signature and/or Office STAMP:

NAME OF FIREFIGHTER: _____

DEPARTMENT NAME: _____

To be eligible for reimbursement for Physicals and/or PPE via NEAFC's SAFER Grant, a Volunteer Firefighter must pass a NFPA 1582 compliant physical and be certified as "Fit for Duty." Please send this completed form to Alex Flores alex@volunteerfirefighter.org / 855-VOL-FIRE