



IAFF Resiliency Training Request Online Training

Complete this form to request the IAFF online Resiliency Training for your local. Trainings are provided to a group of 25 students. If you are interested in attending a virtual resiliency training as an individual, do not complete this form. Instead, visit <https://www.iaff.org/resiliency-training/#find-a-training> to sign up to be notified of the upcoming training dates.

This form must be signed by the president of an IAFF affiliate. Email the completed form to behavioralhealth@iaff.org.

Entity requesting the training			
Entity name:		IAFF Local #:	
Designate a point of contact to be responsible for all logistics and coordination with the IAFF.			
First Name:	Last Name:	Title:	
Phone:	Email:	Organization:	
Payment Information: What entity (ex: Local, Municipality) will pay for the training?			
Entity Name:			
Address Line 1:			
Address Line 2:			
City:	State/Province:	Zip Code:	
The IAFF Online Resiliency Training is 8 hours on two consecutive weekdays. Requested dates are not guaranteed. The following dates would work for us (leave at least four months lead time):			
Choose a training time:			
8:00am- 1:00pm	8:30am-1:30pm	9:00am- 2:00pm	Other:

IAFF Affiliate President Name (please print): _____

Signature: _____

Date: _____