

FLORIDA ALARM SCHOOL LLC

PO Box 602 - Brandon, FL 33509-0602

TRAINING AND FASA/BASA CARD APPLICATION

training@floridaalarmschool.org

Phone 813-621-2333

STUDENT INFORMATION; (Please type or print clearly and sign where indicated with **dark blue or black ink**)

Name Last, _____ First, _____ Mid, _____

Address, _____ City, _____

State, _____ Zip, _____ Phone, _____ - _____ Email, _____ @ _____

DOB, _____ Current FASA/BASA Expiration date or New _____ Attach copy of current card

____ Alarm Agent Training 14 hour - \$249.00 ____ Agent Renewal 6 hour - \$149.00 ____ Replace card - \$24.00

Class Date, _____ City, _____ For online classes attach completion certificate copy.

I have filled out this application completely and truthfully to the best of my knowledge. I understand that I must meet all other requirements for the certification sought.

Agent # _____

Student Signature: _____ Date: _____

COMPANY INFORMATION; (Please type or print clearly and sign where indicated with **dark blue or black ink**)

Company Name, _____

Address, _____ City, _____

State, _____ Zip, _____ Phone, _____ - _____ - _____ Email, _____ @ _____

Qualifier Name (Print), _____ ECLB Lic # _____

As Qualifier, I hereby attest that the applicant listed above is a payroll employee of the Company listed herein, has the amount of experience required, if any, and on successful completion of this training will meet all other requirements for the certification sought. I understand that I must comply with the laws, codes and standards applicable in Florida. Giving any false statements or knowing misrepresentation when applying for certification constitutes a criminal offense and may result in prosecution. I declare that I have read the foregoing document and that the facts stated in it are true.

By signing below I agree to pay in full for training for the above listed student. I understand No refunds will be issued for failure to complete the training satisfactorily or failure to attend the entire class for any reason unless cancelled at least 72 hours prior to the scheduled start of class. Cancellations less than 72 hours from the scheduled start of class may be rescheduled to a future class if available, upon payment of a reschedule fee. Should a class be cancelled by us for any reason, you will have the option of a refund or reschedule to a future date at no additional cost.

Qualifier Signature: _____ Date: _____

Attach check made payable to Florida Alarm School LLC or call us for Credit Card payment. Send this completed form to Florida Alarm School, PO Box 602 Brandon, FL 33509-0602. Or email to training@floridaalarmschool.org Pictures for ID cards will be done in class. For online agent course or transfer ID cards email us a passport like picture for the ID card. For **6 hour Renewal Students** include a copy of the front of their expiring FASA and BASA cards.