

# Firefighting Onboard Training Checklist

Name of Trainee:

Rank/Position:

Date:

Vessel Name:

No.	Checklist Item	Completed	Remarks
1	Location and operation of fire detection systems	<input type="checkbox"/>	<input type="text"/>
2	Use of portable fire extinguishers	<input type="checkbox"/>	<input type="text"/>
3	Operation of fire pumps and hydrants	<input type="checkbox"/>	<input type="text"/>
4	Donning and use of fireman's outfit and BA set	<input type="checkbox"/>	<input type="text"/>
5	Identification of fire control plans and symbols	<input type="checkbox"/>	<input type="text"/>
6	Communication during fire emergencies	<input type="checkbox"/>	<input type="text"/>
7	Activation of fixed fire suppression systems	<input type="checkbox"/>	<input type="text"/>
8	Actions in case of fire in accommodation/engine room	<input type="checkbox"/>	<input type="text"/>

Trainer's Name:

Trainer's Signature:

Additional Comments:

