



WATER SUPPLY - DRAFTING



CANDIDATE NAME (Please Print)	DATE
CHARTER	CHARTER #

FIREFIGHTER I		PRACTICAL SKILL EVALUATION	
Primary Task	Water Supply - Drafting	JPR(s)	5.3.15
Reference Source	NFPA 1001 Standard, 2013 Edition	Skill No.	17-3
Candidate Instruction	The candidate, wearing personal protective clothing, and given the assistance of another fire fighter and required equipment (appropriate type hose strainer, 10' sections of hard suction hose, rubber mallet, utility rope), shall assemble and connect the equipment necessary for drafting from a static water source or self - supporting portable water tank.		State Maximum Allotted 10 minutes

PERFORMANCE STEPS	TEST 1		RETEST 2		RETEST 3	
	P	F	P	F	P	F
DRAFTING						
Wearing complete personal protective clothing.	<input type="checkbox"/>					
Checks hard - suction couplings (removes debris; replacing gaskets if necessary).	<input type="checkbox"/>					
Connects the sections of hard-suction hose (uses mallet if necessary to tighten for an airtight connection).	<input type="checkbox"/>					
Connects strainer to one end of the hard - suction hose (uses mallet if necessary to tighten for an airtight connection; fastens rope to strainer).	<input type="checkbox"/>					
Connects the hard - suction hose to the pump intake (uses mallet if necessary to tighten for airtight connection).	<input type="checkbox"/>					
Puts strainer into the water (uses rope to move hose and keep strainer off bottom).	<input type="checkbox"/>					
Ties up strainer rope (ties to stationary object or pumper).	<input type="checkbox"/>					

Firefighter must have at least 70% pass mark for each skill and perform all critical points (5/7 required).	Score: ___ / 7
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NUMBER OF ATTEMPTS	TEST 1	RETEST 2	RETEST 3
SCORE	<i>17</i>	<i>17</i>	<i>17</i>
TIME			
EVALUATOR COMMENTS			

PRINT NAME FIRST EVALUATOR	CERT #	SKILL TEST DATE / /
SIGNATURE FIRST EVALUATOR X		Overall Skill Sheet Score <input type="checkbox"/> Pass <input type="checkbox"/> Fail
PRINT NAME SECOND EVALUATOR	CERT #	SKILL TEST DATE / /
SIGNATURE SECOND EVALUATOR X		Overall Skill Sheet Score <input type="checkbox"/> Pass <input type="checkbox"/> Fail
PRINT NAME THIRD EVALUATOR	CERT #	SKILL TEST DATE / /
SIGNATURE THIRD EVALUATOR X		Overall Skill Sheet Score <input type="checkbox"/> Pass <input type="checkbox"/> Fail