



ROLLING HOSE



CANDIDATE NAME (Please Print)	DATE
CHARTER	CHARTER #

FIREFIGHTER I	PRACTICAL SKILL EVALUATION		
Primary Task	Rolling Hose	JPR(s)	5.5.2
Reference Source	NFPA 1001 Standard, 2013 Edition	Skill No.	33-1
Candidate Instruction	<p>The student wearing appropriate level of personal protective clothing shall demonstrate two (2) hose rolls. The hose rolls to be demonstrated are the Straight roll and the Donut roll. The student may choose the order in which the hose is rolled. This objective shall be completed within ten (10) minutes. An evaluator or assistant may assist with this skill. There shall be no running during this objective. Upon completion of this objective, all hoses shall be unrolled and returned to the condition in which they were found.</p>		<p>State Maximum Allotted 10 minutes</p>

PERFORMANCE STEPS	TEST 1		RETEST 2		RETEST 3	
	P	F	P	F	P	F
Safely performs the following steps:						
Student should be wearing appropriate level of Personal Protective Equipment.	<input type="checkbox"/>					
STRAIGHT ROLL	<input type="checkbox"/>					
Rolls male coupling in to protect.	<input type="checkbox"/>					
Lays roll down and tamps exposed coils.	<input type="checkbox"/>					
DONUT ROLL	<input type="checkbox"/>					
Starts roll approximately 5'-6' from center toward male coupling.	<input type="checkbox"/>					
Rolls toward female coupling.	<input type="checkbox"/>					
Ends with sufficient hose (approximately 3') to fold over and protect male coupling.	<input type="checkbox"/>					

Firefighter must have at least 70% pass mark for each skill and perform all critical points (5/6 required).	Score: ___ / 6
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NUMBER OF ATTEMPTS	TEST 1	RETEST 2	RETEST 3
SCORE	/ 6	/ 6	/ 6
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