



REPLACE AIR CYLINDERS



CANDIDATE NAME (Please Print)	DATE
CHARTER	CHARTER #

FIREFIGHTER I	PRACTICAL SKILL EVALUATION		
Primary Task	Changing an Air Cylinder	JPR(s)	5.3.1
Reference Source	NFPA 1001, Standard for Fire Fighter Professional Qualifications, 2013 Edition	Skill No.	1-5
Candidate Instruction	The candidate, wearing full personal protective equipment, shall demonstrate the proper procedure for changing a SCBA air cylinder using the one person method. The candidate may use any SCBA unit used during training.		State Maximum Allotted 3 Minutes

PERFORMANCE STEPS	TEST 1		RETEST 2		RETEST 3	
	P	F	P	F	P	F
Doff unit using proper procedures.	<input type="checkbox"/>					
Closes cylinder valve on the used bottle and bleeds off pressure. — CRITICAL POINT	<input type="checkbox"/>					
Disconnects the high pressure couplings from the cylinder and puts the hose coupling on the ground directly in line with the cylinder outlet (ensures grit & liquids cannot enter the end of the unprotected high - pressure hose prior to attaching it to the cylinder outlet valve).	<input type="checkbox"/>					
Releases the cylinder clamp & removes the empty cylinder and places a new cylinder into the backpack.	<input type="checkbox"/>					
Checks cylinder valve opening & the high - pressure hose fitting for debris and checks condition of O-ring. — CRITICAL POINT	<input type="checkbox"/>					
Connects high - pressure hose to cylinder valve opening and opens cylinder valve.	<input type="checkbox"/>					
Checks gauges on cylinder & regulator (ensures they are within 10% of each other).	<input type="checkbox"/>					

Firefighter must have at least 70% pass mark for each skill and perform all critical points (5/7 required). The charter training program may demonstrate and / or simulate this skill.	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