



**Office of the State Fire Marshal  
 Kansas Firefighter Recruitment & Safety Grant  
 (KFRSG)  
 Application  
 Firefighter Physical  
 FY2024**



**Applicant Information**

Department Name: \_\_\_\_\_ FDID#: \_\_\_\_\_  
 Physical Address: \_\_\_\_\_  
 City, Zip: \_\_\_\_\_ County: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
 Chief Name: \_\_\_\_\_

If awarded your Chief will be contacted to verify your status with the department.

Firefighter contact information:

Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City, Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Hire	Date Last Physical – meets intent of NFPA 1582

**Signature**

**Office of the State Fire Marshal, 800 S.W. Jackson, Suite 104, Topeka, Ks 66612**

I attest that to the best of my knowledge the information contained herein is true and accurate.

Applicant Signature & Date: \_\_\_\_\_

**Mail, fax or email to: Kelly Ingold**  
 Office of the State Fire Marshal  
 800 SW Jackson, Suite 104  
 Topeka, KS 66612-1216

Phone: 785-291-3586  
 Fax: 785-296-0151  
 Email: kelly.ingold@ks.gov

**FOR OFFICE USE ONLY**

NFIRS	Received	Status	Approved
Compliant	On-time	Approved	Full
Non-Compliant	Late	Denied	Partial