

# Hazardous Materials Awareness Skill 3-1

NFPA 470, Edition 2022  
Directions

**This skill evaluation will not be completed during this course**

This skill may be accomplished at the students department after successful completion of this Hazardous Material Awareness (HMA) course. If the student wishes to challenge the accredited HMA exam and after successful completion of the skills on this evaluation sheet, this skill sheet shall be emailed or delivered to the student's Resident or Regional Coordinator with challenge exam registration form.

Performance Outcome: The candidate shall recognize the identity the hazardous material/WMD by name and UN/NA number, the primary hazard, and identify the initial isolation distance, and recommended PPE. After reviewing a hazardous materials/WMD incident scenario, utilize communication equipment to relay incident information to the evaluator.

**Required Resources**

- Emergency Response Guide (ERG)
- Safety Data Sheet (SDS)
- Scenario
- Shipping Paper for chemical of concern
- Transport container placard
- Approved communication equipment

Task Steps		1st	2nd	3rd
1.	Did the candidate recognize indicators of the presence of hazardous materials/WMD			
2.	Did the candidate, based on the scenario created by tester and AHJ using one or more of the required resources above, identify and verbalize each of the following: <ul style="list-style-type: none"> <li>• The UN/NA identification number</li> <li>• The Marking/label/placard</li> <li>• The Manufacturer/shipper/carrier documents</li> <li>• The Hazardous material(s) by name</li> <li>• The Emergency response information</li> <li>• The Potential fire, explosion, and health hazards</li> </ul>			
3.	Did the candidate identify secure and evacuate isolation area?			
4.	Did the candidate verbalize responders and the public are protected?			
5.	Did the candidate operate AHJ communication equipment?			

**Candidate must successfully complete ALL TASK STEPS to obtain a “Pass” rating.**

*I certify that the person named below has successfully completed the above skills in accordance with all state and federal laws, SCFA policies and departmental policies and procedures.*

Fire Chief or Training Officer \_\_\_\_\_ Date \_\_\_\_\_

Name of Student (Please Print) \_\_\_\_\_ Student SCFID \_\_\_\_\_