3 FINAL EXAM **COURSE CODE** Date of Birth Enter the numeric portion of the course code in a Name: Month Day five-digit format (enter one-digit course codes as 00001 thru 00009 and enter two-digit Please Print Name Clearly course codes as 00010 thru 00099) and darken $oldsymbol{0}$ in the corresponding ovals. **നെ വരു വരു വരു Email Address** 0000000 If your course includes an alphabetical suffix to 33333333 the course number it must be completely filled in. **4 4 4 4** 4 You may also send your email address to Independent.Study@dhs.gov (5) 5555 For example: IS 100.LE must appear as **6** 00000 IS 00100.LE 7 00000 FINAL EXAM ANSWERS **10 10 10 10** (3) Carefully and completely color in the oval that represents 9999900000 **(A) (A)** your answer. Use "a" for TRUE and "b" for FALSE. യ യ യ യ യ BBB **②②②②**② \odot Social Security No. or Make solid marks that fill the response area completely. തതത 33333 **Program Pre-Assigned Number · Make no stray marks on this form. $\Phi\Phi\Phi\Phi\Phi$ E E E 55555 (D) (D) (D) INCORRECT: $\varnothing \otimes \bigcirc \bigcirc$ CORRECT: $\overline{\mathbf{0}}$ **©©©©** \odot თთთთთთთთ \mathcal{D} \mathcal{D} \mathcal{D} \mathcal{D} \mathcal{D} ED ED ED T F T F ® ® ® ® $\Phi\Phi\Phi$ 100000 26 @ D © D @ 3333333333 99999 Θ 2 @ @ @ @ 27 @ D © @ @ 000 00 00 300000 28 @ 10 @ 10 @ 55555555 \Box 400000 29 @ 10 @ 10 @ 66666666 (M) (M) (M) 30 00 00 00 50000 (AD (AD (AD 600000 31 @ 10 @ 10 @ (B) (B) (B) (B) (B) (B) (B) തതത 700000 32 10 10 10 10 99999999 中中中 33 @ @ @ @ @ 800000 000 ** If you want a unique identifier (Program 900000 ® ® ® **34 @ @ @ @** Pre-Assigned Number), you may contact 35 @ D © @ @ 36 @ D © @ @ 10 @ D © D © 333 the Independent Study Office at 11 @ D © @ @ \mathbf{D} Independent.Study@dhs.gov. This action 12 @ 10 @ 10 @ 37 @ @ @ @ @ ത ത ത will take between 6 to 8 weeks. 13 @ 10 @ 10 38 @ D © @ @ Ø Ø Ø 39 @ D © @ @ 14 @ D © C O 000 000 000 Work Phone Number Home Phone Number 15 @ D © @ @ 40 @ 60 @ 0 00 00 00 41 @ 10 @ 10 @ 16 @ @ @ @ യയ $\overline{\mathbf{0}}$ 17 @ D @ @ @ 42 @ D @ @ $oldsymbol{0}$ **②**②② $\overline{\mathbf{p}}$ 18 @ D © d @ 43 @ 10 @ 10 @ დიდიდიდი 44 @ D © d @ @@@@@@@@@@ 000000000000 20 @ @ @ @ 45 @ B © @ @ 00000000000 **ᲗᲗᲗᲗᲗᲗᲗᲗᲗ**Თ **4** 21 @ 10 @ 10 @ 46 @ D © D @ 47 @ D © @ @ 5555555555 66666666666 23 @ 10 @ 10 @ 48 @ D © @ @ 666666666 **600000000** 24 @ D © @ @ 49 @ © @ @ \bigcirc 25 @ 10 @ 10 @ 50 @ D @ @ 8 8 8 8 8 8 8 8 8 **333333333** 999999999 9999999999This form cannot be duplicated. 4 **Mailing Instructions** 1. Please allow 6 to 8 weeks for the processing of your documents. 6. Mail to: 2. Do not fold this document during use or for mailing except as already creased. National Emergency Training Center 3. Mail this form in a 91/2 X 12 inch envelope. EMI Independent Study Program

Affix proper postage.

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5. Include a return address.

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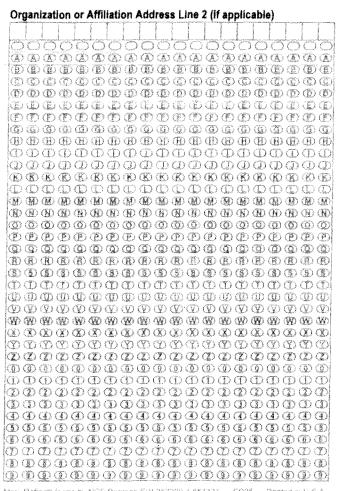
Privacy Act

- 1. GENERAL: This information is provided pursuant to Public Law 93-569 (Privacy Act of 1974), December 31, 1974, for individuals applying for admission to the EMI Independent Study Program.
- 2. AUTHORITY: 5 USC 301, 15 USC 2205, 44 USC 3101, 50 USC App 2253 and 2281; and EO 12127, 12148 and 9397; Title VI of the Civil Rights Act of 1964; and Section 504 of the Rehabilitation Act of 1973.
- 3. PURPOSE: 1) To determine eligibility for participation in EMI Independent Study and NFA Self-Study courses; 2) to enroll citizens who are unable to attend traditional classroom courses; 3) to certify successful completion of courses; and 4) maintain accurate records on behalf of the student.
- 4. USES: Information may be released to: 1) FEMA Staff to analyze application and enrollment patterns for specific courses, and to respond to student inquiries; 2) Members of the Board of Visitors for the specific purpose of evaluating programmatic statistics; 3) Sponsoring colleges to provide college credit for completed courses; 4) Sponsoring State and local officials and agencies to update/evaluate statistics of EMI participants; 5) Members of Congress seeking first party information; 6) Agency training program contractors and computer centers performing administrative functions; and 7) Military personnel or training offices to award military credit for completed courses.
- 5 EFFECTS OF NONDISCLOSURE: Personal information is provided on a voluntary basis. Failure to provide information on this form, however, may result in a delay in processing your application and/or certifying completion of the course.

Information Regarding Disclosure of your Social Security Number Under PL-579, Sec 7b; EO 9397 authorizes the collection of the SSN. The SSN is necessary because of the large number of individuals who have identical names and dates of birth and whose identity can only be distinguished by the SSN. The SSN is used for record-keeping purposes, i.e., to ensure that your academic record is maintained accurately. Disclosure of the SSN is voluntary, however, if you do not provide it, another number will be submitted, which may delay processing of your application and/or course certificate.

EQUAL OPPORTUNITY STATEMENT

The Emergency Management Institute (EMI) and the National Fire Academy (NFA) are equal opportunity institutions. They do not discriminate on the basis of age, sex, race, color, religious belief, national origin, or disability in their admissions and student-related procedures. In addition, employment related decisions based on sexual orientation are prohibited. Both schools make every effort to ensure equitable representation of minorities and women in their student bodies. Qualified minorities and women are encouraged to apply for all courses,



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Department of Homeland Security (DHS), Federal Emergency Management Agency (FEMA) Emergency Management Institute (EMI) Independent Study Program

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Make solid marks that fill the response area completely.

MARKING INSTRUCTIONS

· Complete ALL data fields on this form.

FEMA Form 95-23

- Use a No. 2 pencil or a blue or black ink pen only.
- Do not use pens with ink that soaks through the paper

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Personal information will not be shared based on Privacy Act provisions. Please refer to the Privacy Act Statement on the last page of this form. Reports are compiled from all information on this form. It is essential that the data fields are complete so that course completion information can be furnished to Local, State, Tribal and Federal levels.

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