



Office of Training
and certification

New Jersey Division of Fire Safety

BASIC PRACTICAL SKILLS EXAMINATION REPORT

Skill sheet #

HMA-2

Certification Title

**Hazardous Materials, Awareness Level
IDENTIFY US DOT HAZARD CLASSES**

Applicant Information

Candidate name

DFS ID #

Course #

Evaluation

Standard:

Task

Given a listing of the US DOT Hazard Class and Division numbers, fill in the appropriate Hazard Class name and Division names.

**NFPA 470 - 2022 Edition:
5.2.1**

Conditions and Outcome

Given a Current Department of Transportation Emergency Response Guidebook (ERG), the candidate shall identify the following US DOT hazard classes and divisions. **The candidate will complete this task with a minimum of 20 items answered correctly.**

Number	Task Steps	First Test		Retest #1		Retest #2	
		Pass	Fail	Pass	Fail	Pass	Fail
1.	Hazard Class 1:						
2.	Division 1.1:						
3.	Division 1.2:						
4.	Division 1.3:						
5.	Division 1.4:						
6.	Division 1.5:						
7.	Division 1.6:						
8.	Hazard Class 2:						
9.	Division 2.1:						
10.	Division 2.2:						
11.	Division 2.3:						
12.	Hazard Class 3:						
13.	Hazard Class 4:						
14.	Division 4.1:						
15.	Division 4.2:						
16.	Division 4.3:						
17.	Hazard Class 5:						
18.	Division 5.1:						
19.	Division 5.2:						
20.	Hazard Class 6:						
21.	Division 6.1:						
22.	Division 6.2:						
23.	Hazard Class 7:						
24.	Hazard Class 8:						
25.	Hazard Class 9:						
Final Test Result for Entire Task							

Evaluator signature & comments, Test #1		Evaluator signature & comments, Retest #1		Evaluator signature & comments, Retest #2	
Evaluator signature	Date	Evaluator signature	Date	Evaluator signature	Date
Candidate signature & acknowledgement, Test #1		Candidate signature & acknowledgement, Retest #1		Candidate signature & acknowledgement, Retest #2	
By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments.		By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments.		By my signature below, I acknowledge I have read and understood the evaluation results and evaluator comments.	
Candidate signature	Date	Candidate signature	Date	Candidate signature	Date

Form DFS-SS-1, 10/12

Updated and approved by NJ SME Committee 11/28/23.

Updated 03/05/2024