



## Off-Campus Online Application Process:

The National Fire Academy and the National Disaster Emergency Management University have transitioned to an online admissions system. The online admissions application can be found at this link (you may need to depress CTRL to access the link):

[DHS-FEMA General Admissions Application](#)

If a student has an issue or a question regarding the online admissions system or the process, please contact:

NETC Admissions Department  
(301) 447-1035  
[NETCAdmissions@fema.dhs.gov](mailto:NETCAdmissions@fema.dhs.gov)

### Tutorial:

**Step 1:** The student must input their **FEMA Student ID** and first/last name. If you do not already have a FEMA Student ID (SID), go to [FEMA Student Identification \(SID\) System \(dhs.gov\)](#) to register for one. The FEMA SID is ten-digit number. The student must click Verify after entering their FEMA SID and first and last names. The system will return the middle name, suffix, and date of birth from the SID system.

### FEMA SID

*SID must be verified before continuing.*

|               |                                                    |
|---------------|----------------------------------------------------|
| * FEMA SID:   | <input type="text" value="000000000"/>             |
| * First Name: | <input type="text" value="Student Name"/>          |
| Middle Name:  | <input type="text"/>                               |
| * Last Name:  | <input type="text" value="Student Name"/>          |
| Suffix:       | <input type="text" value="&lt;Select Suffix&gt;"/> |
| Birth Date:   | <input type="text"/>                               |

**Step 2:** To continue, the student must see “Verified!” after clicking Verify. Select Next to continue.



**Step 3:** Complete the fields on the **Demographic Information** screen (starred fields are required). Select Next to continue.

A screenshot of the "Demographic Information" form. It contains several input fields: Home Address 1, Home Address 2, Home City, Home Country (dropdown), State (dropdown), Home Zip, US Citizen (dropdown), Work Phone, Personal Phone, CellPhone, Email Address, and Confirm Email Address. Starred fields indicate required information.

**Step 4:** The **Course/Offer Information** screen allows the student to enter an Invitation Code (if one was supplied to them from the course-offering host) or simple to select a course. If an Invitation Code is required for a course offering, the student must enter the Invitation Code and click on Apply under the Invitation Code before processing to the next block to select the course. To select the course the student must select the drop-down arrow and scroll to the applicable course code. Select Apply under the course selection box and then select Next.

A screenshot of the "Course/Offer Information" form. It features an "Invitation Code" input field with an "Apply" and "Clear" button below it. Below that is a "\* Please select a course:" dropdown menu with an "Apply" button. At the bottom, there is a section titled "Courses For This Application:" with a table header "Code" and a row "No Courses Added". "Previous" and "Next" buttons are located at the bottom left and right respectively.

**Step 5:** The **Course/Offer Information** (continued) screen allows the student to select the Offer Start Date and Offer Location from the drop-down. There is no need to select an Offer Title. In the “Briefly describe...” box, enter the appropriate information and select the appropriate answer in the disabilities drop-down box. Once completed select Save then Next.

**Course/Offer Information**

\* Please select a course:

L0311 - Hurricane Readiness for Coastal Communities

*Your course will not be added until you select the save button below.*

**Offer Information**

\* Offer Start Date:

\* Offer Location:

\* Offer Title:

Briefly describe your activities/responsibilities as they relate to the course for which you are applying and identify how you will use the information obtained from the course. Please refer to the course catalog for more information:

Not required

2488 character(s) remaining

\* Do you have any disabilities (*special allergies, medical, learning disabilities to include dyscalculia, dysgraphia, dyslexia, etc.*) which would require special assistance during your attendance in training?

**Step 6:** On the **Organizational Information** section the student must fill in all information requested then select Next.

## Organizational Information

\* Organization Country: UNITED STATES

\* Organization State: <Select State>

\* Organization Zip: Zip

\* Organization Name: Organization Name

\* Current Position: Current Position

\* Years in Position: X

\* Years of Experience: X

\* Department Size: X

**Step 7:** On this screen, the student must check a box in each category. Once completed the student should select Next.

### Organizational Information

\* Organization Country: UNITED STATES

\* Organization State: <Select State>

\* Organization Zip:

\* Organization Name:

\* Current Position:

\* Years in Position:

\* Years of Experience:

\* Department Size:

*Please select one option from each of the following sections as it relates to the course for which you are applying:*

| * Jurisdiction                                                                                                                                                                                                                                                                                                                                                                    | * Organization Type                                                                                          | * Current Status                                                                                                                                            | * Primary Responsibility                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | * Experience Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | * Business Type                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="radio"/> City/Town/Village<br><input type="radio"/> County Government<br><input type="radio"/> DHS/FEMA<br><input type="radio"/> Federal/Military (non-DHS)<br><input type="radio"/> Foreign<br><input type="radio"/> Industry/Business<br><input type="radio"/> Special District/Township<br><input type="radio"/> Statewide<br><input type="radio"/> Tribal Nation | <input type="radio"/> All Career<br><input type="radio"/> All Volunteer<br><input type="radio"/> Combination | <input type="radio"/> Disaster Reservist<br><input type="radio"/> Paid Full Time<br><input type="radio"/> Paid Part Time<br><input type="radio"/> Volunteer | <input type="radio"/> Dis. Response/Recovery<br><input type="radio"/> Emergency Medical Service<br><input type="radio"/> Emergency Preparedness<br><input type="radio"/> Fire Prevention<br><input type="radio"/> Fire Suppression<br><input type="radio"/> Hazard Mitigation<br><input type="radio"/> Health<br><input type="radio"/> Investigation<br><input type="radio"/> Management<br><input type="radio"/> Other<br><input type="radio"/> Program/Activity<br><input type="radio"/> Public Works<br><input type="radio"/> Scientific/Engineering<br><input type="radio"/> Training/Education | <input type="radio"/> Administration/Staff Support<br><input type="radio"/> Arson<br><input type="radio"/> Budgeting/Planning<br><input type="radio"/> Code Development<br><input type="radio"/> Code<br><input type="radio"/> Enforcement/Inspection<br><input type="radio"/> Coordination/Liaison<br><input type="radio"/> Design and Planning<br><input type="radio"/> Incident Command<br><input type="radio"/> Law Enforcement<br><input type="radio"/> Other<br><input type="radio"/> Program Development/Delivery<br><input type="radio"/> Public Education<br><input type="radio"/> Research and Development<br><input type="radio"/> Supervision<br><input type="radio"/> Support Services | <input type="radio"/> Education<br><input type="radio"/> Emergency Management<br><input type="radio"/> Fire Service<br><input type="radio"/> Government<br><input type="radio"/> Health Care<br><input type="radio"/> Law Enforcement<br><input type="radio"/> Public Works<br><input type="radio"/> Volunteer Agency |

[Previous](#) [Next](#)

**Step 8:** The next screen is labeled **Other Information**. This section is optional. These fields are used for statistical purposes only. Once completed select Next.

### Other Information

*The following fields are used for statistical purposes only.*

Gender:  Race:  Ethnicity:

**Step 9:** Attach all required documents including completion certificates for all course pre-requisites. After all files have been attached or if there are no **attachments**, select Continue.

### Attachments

Course Related Attachments

PDF File to upload: [?](#)   Description:

*100 character(s) remaining*

**Attached Files:**

| Name              | Description |
|-------------------|-------------|
| No Files Attached |             |

**Step 10:** At this point, the student will see a screen where you will be asked if they have completed all the information. They should select Yes. If there is any required information that is missing, they will need to go back and correct that before the application is forwarded.

**Step 11:** The **Head of Organizational Information** is where the student enters the name and email address of the person **who has been designated to endorse the application**. In some cases this information was given to the student by the course-offering host. Once the student clicks Submit, the Head of the Sponsoring Organization has 14 days to respond to the request or it will be automatically rejected.

## Application Endorsements

At least one of the courses you are applying for requires endorsement from the head of your sponsoring organization. Please fill in the information below for the head of your sponsoring organization.

### Head of Organization Information

\* Head of Organization Name:

\* Head of Organization Title:

\* Head of Organization Email:

\* Confirm Head of Organization Email:

Submit

**Step 12:** This is the final screen showing the student that they successfully applied for their selected course.

Congratulations! You have successfully submitted your application(s) for the following courses:

| Code | Title | Endorsement Needed? |
|------|-------|---------------------|
|      |       |                     |

The courses noted above require endorsement from the head of your sponsoring organization. These applications will be forwarded to the appropriate parties for endorsement. If endorsed your application will then be forwarded to the National Emergency Training Center for further review and you will receive notice. You will receive email confirmation of your submissions shortly.