

## REVISION REQUEST - TRAINING

### RURAL VOLUNTEER FIRE DEPARTMENT ASSISTANCE PROGRAM

*If revising an application, provide a copy of the original application or approval letter associated with this request.*

Name of Fire Department:

County:

Point of Contact:

Phone Number:

Email:

Are you requesting an update to the original dollar amount requested?

Yes Original  
No Amount:

Requested  
Amount:

*If so, please enter both the original requested amount and the new requested amount.*

**Revision Reason:** (ex: to revise application, update other department information, change tax ID number, report DUNS number, etc.)

*If revising an application, provide a copy of the approval letter associated with this request.*

*If revising training tuition, please list course(s), date(s), and number of students that are changing.*

Name of School:

Begin Date	End Date	Course Name(s)	Number of Trainees	Tuition Cost Per Trainee

**APPLICANT CERTIFICATION:** I certify that the information contained in this application is true and accurate to the best of my knowledge and that I am duly authorized to certify this application **(Required)** on behalf of the fire department. I understand that knowingly making false or fraudulent statements or representations may result in program sanctions and/or criminal penalties.

Name: (print)

Title:

Date:

**To submit electronically:**  
Press the **Submit Form** button or download and email this PDF form to: 2604@tfs.tamu.edu

**To submit by mail or fax:** Press the **Print Form** button. Be sure to attach your supporting documents before sending.

*For questions, please contact us at:  
2604@tfs.tamu.edu or by phone:  
(979) 458-6505*

Mail or Fax to:  
**Rural VFD Assistance Program**  
Texas A&M Forest Service  
Capacity Building Department  
200 Technology Way, Suite 1162  
College Station, Texas 77845  
Fax: (979) 845-6160