



BALTIMORE COUNTY FIRE RESCUE ACADEMY BASIC FIREFIGHTER SKILLS ASSESSMENT MAZE SKILLS CARD

LAST NAME: _____ C# _____ Attempt # _____ DATE: _____ **PRE-REQUISITE 3**

- Instructor will provide assignment.
 - Successfully navigate the maze prop while in full PPE/SCBA (on air) and find the exit without assistance.
- There is no maximum time limit for this skill. The candidate must complete the entire skill prior to exhausting one (1) cylinder.

- PPE will be required when attempting this skill and all skills will be performed in a safe and effective manner.

Any skill not performed requires documentation by the evaluator

Instructors and field personnel only intervene when issues of safety arise. Candidates are not to ask questions or for assistance once time begins.

SKILLS	WAS SKILL PERFORMED?	COMMENTS
Candidate communicates pertinent information to instructor (e.g. stairway, changes in elevation, confined space)	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Candidate remained low and sounded to ensure floor was present & safe	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Candidate successfully uses walls to navigate maze as directed. (i.e. “right on right”)	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Candidate successfully navigates maze in zero visibility.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Candidate was able to crawl throughout the maze without disconnecting/removing face piece.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Candidate wore full firefighting PPE & SCBA (on air) throughout entire exercise.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
6 Total possible points: 4 are required to pass **GREY ITEMS MUST BE PERFORMED**		TOTAL POINTS

If the student requires assistance prior to the skill being completed, the skill will be terminated & a “not performed” is checked with supported documentation.

Additional Evaluator Comments:

- **Failure to complete all gray items will result in an incomplete for this skill.**

CANDIDATE’S SIGNATURE: _____ EVALUATOR’S SIGNATURE: _____ PRINT NAME: _____