C-14 Forms Completion Guide

The following must be completed for the application to be accepted by the FDNY.

**A-20 Form:**

✓ If no SSN, provide a copy of a Visa and place the Visa number in the blank
✓ Applying for: Type: C-14
✓ First Name, M.I., Last Name
✓ Daytime Phone Number
✓ Email address: Columbia Email
✓ Gender
✓ Date of Birth (Month, Day, Year)
✓ Height and weight must be filled in in feet-inches and pounds
✓ Mailing address is applicant’s address
✓ Experience-Length of Time (post degree)
✓ Applicant’s Company name: Columbia University
✓ Applicant’s Worksite address: Address of the lab
✓ Signature and date

**Employee Affirmation Form:**

✓ Section 1:
  o Work address and Zip Code
✓ Section 2:
  o Complete all blanks (Experience is post degree only)
✓ Section 3:
  o Complete all blanks
  o Check the box above signature
✓ Section 4:
  o Mark one and send a copy of your license (or transcript with conferral date) with the application
✓ Section 5:
  o Not needed for a Master or higher degree
✓ Section 6:
  o Recent color headshot photo jpeg or jpg (2x2)
✓ Section 7:
  o EH&S will pay for the fee. You must be compliant with Laboratory Safety Training for EH&S to apply for your permit
✓ Section 9:
  o Complete printed name, signature, date
  o Notarization not needed if EH&S is applying on your behalf

**Employee Statement:**

✓ Date
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- First blank (Applicant’s full name)
- Type of Degree (Highest degree earned)
- Major in Degree Earned
- Years of lab experience after degree was earned
- Employed at: Address of the lab
- Signature and printed name

Employer’s Recommendation:

- Date
- First blank (Applicant’s full name)
- Second blank (Applicant’s full name)
- Third and fourth blanks: Years and months of experience after degree earned
- Fifth blank: Name and address of employer: Columbia University and lab address
- Employer Information: Principal Investigator