

The Fiber Optic Association, Inc.

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 Email: info@thefoa.org http://www.TheFOA.org

Verification of Work Experience for the IMSA Level I/II Fiber Technician to IMSA/FOA Certified Fiber Optic Technician (CFOT) Conversion Course

Name _____ Title _____

Company (if applicable) _____

Street _____

City _____ State _____ Zip _____

Phone _____ email _____

Employment History (copy/paste this section for each job you held or attach outline separately)

NOTE: Must have at least 2 years experience as a fiber tech to qualify

Job Title:	
Company Name:	
Company Address:	
Start/end dates:	
	Describe your responsibilities (choose the categories that apply):
Termination	
Splicing	
Pulling cable	
Restoration	
Testing	
List test equip. used:	
Troubleshooting	
Planning/designing networks	
Creating documentation	
Other:	
Fiber Optic Training	Describe the training – online or classroom? Did it include hands-on exercises? Did you get a certification?