Effective Date: November 2017



RURAL FIRE SERVICE

Volunteer Community Educator Application Form

Volunteer	ID Number:		
Name:			
Address:			
Telephone Number:			
Email Add	ress:		
Region:		Are	a:
Brigade:			
Current Br	igade Position:		
			if applicable

Process of Volunteer Community Educator Application

- Consult with your Brigade First Officer about taking on the Volunteer Community Educator role.
- Contact your regional Bushfire Safety Officer to discuss the role and application requirements.
- Complete and submit this form to your Brigade Management Committee for endorsement.
- The Brigade Management Committee will either endorse or decline the application.
- The application will then be forwarded to your local Rural Fire Service (RFS) Area Office.
- You will receive notification of the outcome of this application in writing.
- If your application is unsuccessful, you may choose to appeal this decision. For more information please refer to the 'Volunteer Community Educator Unsuccessful Application Appeal Process' (see Rural Fire Brigade Manual Procedure B1.1.1 - Volunteer Community Educators)

Application Endorsement We find the applicant to meet the following criteria:		First Officer Endorsement		Area Director Endorsement	
		NO	YES	NO	
Community minded and has the ability to deliver programs to a diverse audience.					
Able to work autonomously as well as with other people as part of a team.					
Able to liaise with members of the public and private sector organisations and community groups.					
Has the ability to communicate well with local brigades and volunteers and develop a positive culture in their Rural Fire Brigade Area.					
Is able to comply with relevant Queensland Fire and Emergency Services policies including the Code of Conduct and Work Health and Safety.					

Note: Any "NO" responses must be supported by a brief explanation attached in writing.

First Officer Endorsement

I	, on behalf of the Management Committee of		
Rural Fire Brigade,	this application.		
Position:	Signature:		
Phone Number:	Date:		
Area Director End	lorsement		
Name:	Signature:		
Phone Number:	Date:		
 to process Volu for the departm Collection of this 	and Emergency Services is collecting the information on this form for the following purposes: inteer Community Educator applications tent to discharge its legislative, accountability, administrative, reporting, management, personnel and fin- information is required by the <i>Fire and Emergency Services Act 1990</i> . For further information about priv formation, refer to the department's privacy plan as amended from time to time, available on the QFES v	vacy and other uses and disclosures of	
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