Volunteer Application Form

Thank you for applying to become a member of the Rural Fire Service (RFS).

How this works:

- 1. Complete this Volunteer Application Form ensuring all sections are completed and answered honestly.
- 2. If you already hold a current Blue Card, simply provide a photocopy of your Blue Card to allow RFS to link your card to our organisation.
- 3. If you do not hold a Blue Card and need to apply, go to <u>www.bluecard.qld.gov.au</u> to register for an online account. Once you have registered, you will be provided with a online account number. Include the account number on your RFS application form.
- 4. If you are a registered teacher or police officer, you can apply for a Blue Card Exemption online by registering for an online account at <u>www.bluecard.qld.gov.au</u>.
- 5. If you are unsure of your eligibility, contact Blue Card Services on 1800 113 611 for advice. If you are having difficulties accessing the online Blue Card application, please contact your local Area Office.
- 6. Take your application form to the next brigade meeting (your authorised Brigade Officer will advise when this will be). The brigade will vote to accept you as a potential member subject to the processing of your application by RFS. Ensure the authorised officer of the brigade signs the Brigade Endorsement on your application form (Section 13).
- 7. All volunteers are issued with an RFS ID Card so please include a passport style photo with your application.
- 8. For your privacy, take your forms with you and post or email them to your local Area Office. The Area Office will endorse the forms before sending to State Office for processing. Please allow 8-12 weeks for your application to be processed. If you outlined any medical conditions or illness in your application, you may be contacted by a QFES representative to discuss this further. You will receive a letter and welcome pack once your application is finalised.

9. You cannot commence participating with the brigade until you hold a valid Blue Card and receive a letter with your Volunteer ID Number and ID Card.

Important Information

Having a medical condition or illness does not necessarily preclude you from undertaking a particular role, but rather allows RFS and your brigade to support you in undertaking your role safely.

To become a volunteer and are not an Australian Citizen you must provide evidence of your ability to work in Australia. Citizens of New Zealand are not required to provide evidence.

The completion of this application and receiving brigade endorsement does not make you a member of the brigade. Your application must be processed by RFS before you are considered a brigade member. Please be aware that you are not covered by any of the protections offered to RFS volunteers, such as WorkCover and insurance until you have received your volunteer ID Number from RFS.

Privacy Statement

Personal information collected as a result of your application will be used by QFES for general administration, vocational education and training administration and regulation, as well as organisational planning, reporting, personnel management, communication, research, evaluation, auditing, and marketing. Only authorised personnel have access to this information.

Your personal information may be disclosed to Commonwealth and State Government authorities and agencies and other entities relevant to the purposes of collection – for example, relevant learning providers. For further information about privacy, visit: <u>http://www.qld.gov.au/legal/privacy/</u>





Form

Effective Date: xx/xx/2021	Version 6.3			x RFS

RURAL FIRE BRIGADE

Membership Application

Brigade you wish	n to join:								
1. Type of App	lication								
New Member	(18 years +)	Junior Memb	er (16-18 years)	Transt	ferring mem	ber (no CH	C required)	al Member	
New Member	, Primary F	Producer Brigade	(no Blue Card or CH	IC required)					
2. Type of Role	•								
What kind of role	e are you in	tending to take o	n within the br	igade?	Firefigh	iter	OR Sup	oport Member	
3. Personal De	tails								
Title:		Given Names:					Preferred Nam	ne:	
Last Name:			(as sho		I documentation) er Name/s:				
	(as sl	nown on official document	,					rried Name/s or aliases	
Date of Birth:			Gender:	Male	Female		Australian Citi	zen: Yes	No
Birthplace:		(City, State, Cou	intrv)		Licence	Number:			
Have you lived in N	New Zealan		27	re in the la	ast 10 vears	since turni	ng 16 vears of a	ige? Yes	No
(If yes, you will need to									
4. Contact Det	ails								
Residential								Postco	de:
Address:									
Postal Address:								Postco	de:
Drimory Dhonoy			(insert "AS ABOV	/E" if same as	Residential Addr	,			
Primary Phone:	Please Circle:	mobile / home / work			Secondar	ly Phone.	Please Circle: mobile	/ home / work	
Other Phone:]	Fax:			
Email Address:	Please Circle:	mobile / home / work]
5. Next of Kin I	Details (Fo	 1 F	er the age of 18	, this sho	uld be your		-		
Title:		First Name:				Las	t Name:		
Postal Address:			(insert "AS ABO)	/F" if same as	Applicant's Addr	(229		Postco	de:
Primary Phone:			(110012 71071201		Secondar	,			
i initiary i nono.	Please Circle:	mobile / home / work				y mono.	Please Circle: mobile	/ home / work	
Other Phone:					Rela	ationship:			
	Please Circle:	mobile / home / work							
6. History with	QFES								
Are you currently	/ a QFES p	aid employee or	volunteer?	Yes	No				
		i	if yes, please s	select:	RFS	Fire	and Rescue	Public	Servant
					SES	Sci	entific	Other	
Have you previo	usly been a	a QFES paid emp	lovee or volun	iteer?	Yes	No			
	2		if yes, please s		RFS		and Rescue	Public	Servant
			5 71		SES		entific	Other	
								SUEENSLAND	* SA
								MERGENCI'S	Queensland
									Government

7. Medical Information

1. Have you had, or do you currently have any existing medical conditions (eg. heart disease, dia back injuries, respiratory illness)? These can affect your ability to perform the duties of your role This may also include the ability to undertake heavy physical work, working on uneven grounds, and standing for long periods of time.	(firefighter or support) in the RFS.				
No Yes If yes, please provide details:					
2. Are you being treated by a doctor for any illness or condition or taking any medication that may the duties of your role in the RFS (firefighter or support). This includes medication that may impart operate equipment/vehicles.					
No Yes If yes, please provide details:					
3. Firefighters only : are you able to safely wear all Personal Protective Equipment (PPE) requireduties e.g. helmet, goggles, face mask, ear plugs, safety boots, flame retardant jackets and trou					
No Yes If no, please provide details:					
8. Blue Card Application					
I am eligible to apply for a Blue Card and: I have applied for a Blue Card/ Exemption Card online. My online account number is:					
I hold a current Blue Card and have provided a photocopy of my current Blue Card (or)					
I am a Registered Junior or applying to join a Primary Producer Brigade and do not require a	Blue Card				
9. Consent to Check National Police Records and Advise a Third Party (new members, age	ed 18 and over only)				
QUEENSLAND POLICE SERVICE AUTHORITY AND INDEMNIFICATION					
Proof of Identity Photocopy of your Driver's Licence (front and back); OR Attach a legible: Destensory of your current present including photograph and signate					
Photocopies of two other forms of identity bearing your signature.					
Name of Third Party: Queensland Fire and Emergency Services					
This check is for the purpose of undertaking work with the Third Party that is unpaid as a volur	nteer.				
 or any member or agent of the QPS to: check my name against records that are held by the Queensland Police Service (QPS) or are avai Australian Police Services, and I further agree to provide my fingerprint impressions if required for have a conviction or if I only have a conviction that cannot be disclosed by virtue of the <i>Criminal La 1986 (Qld)</i> to advise the above-named third party that I do not have a conviction that can be disclosed, I authorise the disclosure to the above-named third party of the details of that convic details disclosed to the above- named third party will be considered by them and may affect any age a position of trust or employment, or as the case may be. I hereby agree not to take or suffer or permit to be taken any legal action whatsoever or howsoeve State of Queensland, the Commissioner of Police or any member or agent of the QPS in respect or disclosure or use of information relating in any way to records under the name supplied. 	checking purposes, and if I do not aw (Rehabilitation of Offenders) Act used. If I have a conviction that can tion. I clearly understand that any oplication I have made with them for r against the Crown in the right of the				
10. Application Endorsement					
 I have provided a copy of my identification. I acknowledge that I am not a brigade member until I have received a letter of acceptance from the I understand a copy of this form may be provided to the brigade I am applying to join. I understand that my membership may be terminated at any time upon a majority vote of members p same. I agree to care for and return all uniforms and PPE provided to me by RFS on resignation/terminate I acknowledge that I am required to undertake all activities with integrity and impartiality; being hol ensuring decisions are unprejudiced, unbiased, and just. I acknowledge that I am required to disclose any / all disciplinary action against me by QFES or ar I understand I must adhere to the following documents which are available through my local Area 0 Code of Conduct - Brigade Management Rules - QFES QFES Acceptable Use Policy - QFES Statement of Cultural Intent 	resent at a meeting called to consider ion of my membership. nest, fair, and respectful and y other workforce.				
Signature of Applicant:	Date:				
Signature of Witness:	Date:				
10B. Parent / Guardian Endorsement (for applicants under 18 years of age)					
I, as the legal Parent/Guardian, give my consent for					
 to apply for membership with the RFS, to participate as a Registered Junior. I authorise my child to travel in Rural Fire Brigade vehicles as necessary to fulfil the requirements of trai I have read and understand the information provided regarding the <i>Volunteering in the RFS</i> brochure. I certify that all information declared on this application is true and correct and verify my child is over the 					
Signature of Parent/Guardian	Date:				

11. Unique Student Identifier (USI) or Learning Unique Id	lentifier (LUI)
If you have a USI/LUI please provide it here (Please Print Clearly):	
12. ID Card Photo	
I have included a digital photo for my ID Card (JPG Format 300 - 600d	bi):
13. Brigade and Area Office Endorsement	
The brigade has accepted the applicant's membership, su	
 The brigade acknowledges that the applicant is not a compensation insurance until the applicant holds a c volunteer ID number. 	member of the brigade and not covered by workers urrent Blue Card and has received a letter providing their
Meeting/Approval Date: Approve	ed: Yes No
Brigade Management Committee Representative and witness	s
Name: Signature:	Date:
RFS Area Director Approval	
Name: Signature:	Date:

AREA OFFICE CONTACT DETAILS

OFFICE	PHONE	EMAIL
Far Northern Region	(07) 4032 8739	RFS.FarNorthern@qfes.qld.gov.au
Cairns Area Office	(07) 4232 5468	RFSQ.Cairns@qfes.qld.gov.au
Innisfail Area Office	(07) 4063 4004	RFSQ.Innisfail@qfes.qld.gov.au
Northern Region	(07) 4796 9076	RFS.Northern@qfes.qld.gov.au
North West Area Office	(07) 4761 5130	RFS.NorthWest@qfes.qld.gov.au
Townsville Area Office	(07) 4796 9082	RFSQ.Townsville@qfes.qld.gov.au
Central Region	(07) 4932 8123	RFS.CentralRegion@qfes.qld.gov.au
Barcaldine Area Office	(07) 4651 1190	RFSQ.EmeraldBarcaldine@qfes.qld.gov.au
Emerald Area Office	(07) 4843 9020	RFSQ.EmeraldBarcaldine@qfes.qld.gov.au
Gladstone Area Office	(07) 4899 2200	RFSQ.Gladstone@qfes.qld.gov.au
Mackay Area Office	(07) 4965 6641	RFSQ.Mackay@qfes.qld.gov.au
Rockhampton Area Office	(07) 4932 8129	RFSQ.Rockhampton@qfes.qld.gov.au
North Coast Region	(07) 4190 4836	RFSQ.NorthCoast@qfes.qld.gov.au
Bundaberg Area Office	(07) 4154 6120	RFSQ.Bundaberg@qfes.qld.gov.au
Burnett Area Office	(07) 4172 8700	RFSQ.Burnett@qfes.qld.gov.au
Caloundra Area Office	(07) 5420 7517	RFSQ.Caloundra@qfes.qld.gov.au
Maryborough Area Office	(07) 4122 0337	RFSQ.Maryborough@qfes.qld.gov.au
South West Region	(07) 4592 5213	RFS.SouthWest@qfes.qld.gov.au
Darling Downs Area Office	(07) 4698 5720	RFSQ.DarlingDowns@qfes.qld.gov.au
Warrego Area Office	(07) 4578 0045	RFSQ.Roma@qfes.qld.gov.au
Western Rivers Area Office	(07) 4596 9403	RFS.WesternRivers@qfes.qld.gov.au
South East Region	(07) 3287 8546	RFSQ.SouthEast@qfes.qld.gov.au
South Coast Area Office	(07)5587 4101	RFSQ.SouthCoast@qfes.qld.gov.au
West Moreton Area Office	(07) 3294 4944	RFSQ.WestMoreton@qfes.qld.gov.au
Brisbane Region	(07) 5420 3730	RFS.Brisbane@qfes.qld.gov.au
Caboolture Area Office	(07) 5420 3733	RFSQ.Caboolture@qfes.qld.gov.au



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