**LIFE MEMBER AWARD NOMINATION**



**Queensland State Emergency Service**

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| **Part One – Nominee details** | | | | | | | | |
| **Surname:** | | | | | **First names:** | | | |
| **Member No.:** | | **Rank/position:** | | | | | **Date of birth:** | |
| **Region**: | FNR | | NR | CEN | NCR | BNE | SER | SWR |
| **Group:** | | | | | | | | |

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| **Part Two – Eligible service dates** (Exact dates are required. If applicable, Statement of Service from Interstate SES are required) |
| **SES Service Calculation** - Please refer to page 4 for instructions on how to use the below SES Service Calculator. |

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| **Part Three – Justification** (Additional information can be attached to this application) |
| **High level of contribution demonstrated to training and operations, including hours and quality of operational activity.** (i.e. how involved has the nominee been within the SES) |
| **Significant achievements within SES and externally.** (i.e. has the nominee received any awards) |
| **General demeanour, attitude and behavioural history.** (i.e. how has the nominee affected other members) |
| **Participating actively in community engagement and commitment to the community.** (i.e. how involved has the nominee been within the community) |

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| **Involvement in the wider body, e.g. Queensland Fire and Emergency Services (QFES), Queensland Police Service, relevant Local Government/s.** (i.e. how involved has the nominee been overall) |
| **Overall distinguished levels of services.** (i.e. overall has the nominee performed their duties with distinction) |
| **Outstanding initiatives by a SES member to increase Member recruitment, public awareness of the SES, and/or Group/Unit effectiveness.** (i.e. has the nominee been actively involved in strategies and/or actions for the betterment/advancement of SES) |
| **Other justification for consideration.** |

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| **Part Four – Nominating officer declaration and Area Office Recommendation** | | | |
| To the best of my knowledge, the nominee meets the eligibility criteria as outlined in SES Life Member Award Procedure. | | | |
| Name: |  | Position: |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| **Supported by Local Controller** | | | |
| Name: |  | Unit |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| **Recommended by Area Controller** | | | |
| Name: |  | Area |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| **Part Five – Regional Office Endorsement** | | | |
| **To be completed by SES Regional Support Officer:**  Print “VIMS Detailed Member” Report attached  If required, SES interstate service supporting documentation provided  SES service period verified (please use SES service calculation)  You have checked that the nominee is considered an ‘active’ member, has participated in group activities during the nominated timeframe and that their service has been diligent and ethical. If attendance is minimal provide further supporting information to justify nomination.  Due diligence check (i.e. contentious issue etc) | | | |
| Name: |  | Position |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| **Regional Manager/Director Endorsement**  I have reviewed the relevant and necessary information to make a fully informed decision to endorse this nomination. | | | |
| Name: |  | Position |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| **Part Six – SES State Office** | | | |
| Performance and Integrity Checks (i.e. ESU/ERU/SES Director Checks)  Supporting documents attached  Nomination form signed and completed | | | |
| Name: |  | Position |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
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| Comments | | | |
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| **Part Seven – Assistant Commissioner Endorsement** | | | |
| I endorse                           SES Life Member Award nomination and declare the years of service and all eligibility criteria have been validated.  I do not endorse                           SES Life Member Award nomination. | | | |
| Name: |  | Position |  |
| Email: |  | Contact: |  |
| Signed: |  | Date: |  |
|  |  |  |  |
| Comments | | | |
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| Queensland Fire and Emergency Services is collecting personal information for the purpose of processing nominations subject to the requirements of the *Information Privacy Act 2009* (the IP Act) which are defined in the 11 Information Privacy Principles (IPPs). For information on the 11 IPPs, refer to Schedule 3 of the IP Act. | | | |

**Statement of Eligible Service**

Any nominee using SES service from Interstate is required to provide a supporting statement from that organisation when submitting a nomination. Statement must include the eligible service dates.

**How to use SES Service Calculator**

1. Double click anywhere inside the *SES Service Calculation* table to type *start* and *finish dates;* when finished typing service period dates, click anywhere outside the calculator; OR
2. Right click anywhere inside the *SES Service Calculation* table, select *Worksheet Object* and *Open*. An excel spreadsheet will open to type *start* and *finish dates*, when finished typing service period dates click ‘X’ to close the spreadsheet (no need to Save). The *SES Service Calculation* table should be updated with relevant dates.

