



Volunteer Application Form

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

How this works:

1. Complete this Volunteer Application Form, ensuring all sections are completed and answered accurately.
2. If you already hold a current Blue Card, simply provide a photocopy of your Blue Card to allow RFSQ to link your card to our service.
3. If you do not hold a Blue Card and need to apply, go to www.bluecard.qld.gov.au to register for an online account. Once you have registered, you will be provided with an online account number. Include the account number on your RFSQ 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 www.bluecard.qld.gov.au.
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. Please include a passport style photo with your application that can be used on your ID Card, when issued.
7. Take your application form to the next Brigade meeting (your authorised Brigade Officer can advise when this will be). The Brigade will vote on your application, subject to the processing of your application by RFSQ. Ensure the authorised officer of the Brigade signs the Brigade Endorsement on your application form (Section 13).
8. 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.
9. If you outlined any medical conditions or illness in your application, you may be contacted by a Queensland Fire Department (QFD) representative to discuss this further.
10. Please allow 8-12 weeks for your application to be processed. You will receive a letter and welcome pack once your application is finalised.

Important Information

You cannot commence participating with the Brigade until you hold a valid Blue Card and receive your welcome pack which includes a letter with your Volunteer ID Number and ID Card. This is also the point at which you are afforded the protections offered to RFSQ volunteer members such as Work Cover and insurance.

Having a medical condition or illness does not necessarily preclude you from undertaking a particular role. The information you provide allows RFSQ and your Brigade to consider how to best support you in undertaking your role safely.

If you are not an Australian Citizen and you would like to become a volunteer you must provide evidence of your ability to work in Australia. Citizens of New Zealand are exempt from this requirement.

Privacy Statement

Personal information collected as a result of your application will be used by QFD 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: <http://www.qld.gov.au/legal/privacy/>



Form

Effective Date: 11/10/2024 Version: 6.6

PD 072 – Rural Fire Brigade Volunteer Membership Application

Responsible Owner: Director, Volunteering and Culture Branch, Rural Fire Service Queensland

Audience: ☐ SCSD ☐ State Ops ☐ QFR ☒ RFSQ

Brigade you wish to join:	
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1. Type of Application

<input type="checkbox"/> New Member (18 years +)	<input type="checkbox"/> Junior Member (16-18 years; no Blue Card required)	<input type="checkbox"/> Transferring member (no CHC required)	<input type="checkbox"/> Dual member
<input type="checkbox"/> New Member, Primary Producer Brigade (no Blue Card or CHC required)			

2. Type of Role

What kind of role are you intending to take on within the brigade	<input type="checkbox"/> Firefighter	OR	<input type="checkbox"/> Support Member
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3. Personal Details

Title:		Given Names:		Preferred Name:			
		(as shown on official documentation)					
Last Name:		Former Name/s:					
		(as shown on official documentation) (Maiden Name, Married Name/s or Aliases)					
Date of Birth:		Gender:	<input type="checkbox"/> M	<input type="checkbox"/> F	Australian Citizen	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Birthplace:		Licence Number:					
	(City, State, Country)						
Have you lived in New Zealand for a period of 12 months or more in the last 10 years since turning 16 years of age?						<input type="checkbox"/> Yes	<input type="checkbox"/> No
(If yes, you will need to complete the New Zealand Vetting form. Download a copy from www.fire.qld.gov.au/Volunteering , or contact your Area Office)							

4. Contact Details

Residential Address:		Postcode:	
Postal Address: (insert 'AS ABOVE' if same as Residential Address)		Postcode:	
Primary Phone:			
Secondary Phone:			
Email Address:			

5. Next of Kin Details (For applicants under the age of 18, this should be your parent/guardian)

Title:		First Name:		Last Name:	
Relationship:					
Primary Phone:		Secondary Phone:			



6. History with QFD					
Are you currently a QFD paid employee or volunteer?				Yes	No
If yes please select:	<input type="checkbox"/>	RFSQ	<input type="checkbox"/>	Queensland Fire and Rescue	Public Servant
	<input type="checkbox"/>	Scientific	<input type="checkbox"/>	Other:	
Have you previously been a QFD paid employee or volunteer?				Yes	No
If yes please select:	<input type="checkbox"/>	RFSQ	<input type="checkbox"/>	Queensland Fire and Rescue	Public Servant
	<input type="checkbox"/>	Scientific	<input type="checkbox"/>	Other:	
Were you ever an Emergency Services Cadet?				Yes	No

7. Medical Information				
1. Have you had, or do you currently have any existing medical conditions (e.g., heart disease, diabetes, epilepsy, knee/shoulder/ back injuries, respiratory illness)? These can affect your ability to perform the duties of particular roles in the RFSQ. This may also impact the ability to undertake heavy physical work, working on uneven grounds, working in hot and/or smoky environments, and standing for long periods of time.				
<input type="checkbox"/>	No	<input type="checkbox"/>	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 affect your ability to perform the duties of your role in the RFSQ? This includes medication that may impair your ability to dissipate heat or operate equipment/vehicles.				
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	If yes, please provide details:
3. Firefighters only: Are you able to safely wear all Personal Protective Equipment (PPE) requirements for operational firefighting duties e.g., helmet, goggles, face mask, ear plugs, safety boots, flame retardant jackets and trousers for an extended period of time?				
<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	If no, please provide details:

8. Blue Card Application	
I am eligible to apply for a blue card and:	
<input type="checkbox"/>	I have applied for a Blue Card/ Exemption Card online. My online account number is:
<input type="checkbox"/>	I hold a current Blue Card and have provided a photocopy of my current Blue Card (or)
<input type="checkbox"/>	I am applying to be a Registered Junior or 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, aged 18 and over only)	
Queensland Police Service Authority and Indemnification	
Proof of Identity Attach a legible:	<input type="checkbox"/> Photocopy of your Driver's Licence (front and back); OR
	<input type="checkbox"/> Photocopy of your current passport including photograph and signature; OR
	<input type="checkbox"/> Photocopies of two other forms of identity bearing your signature.
Name of Third Party:	Queensland Fire Department
This check is for the purpose of undertaking work with the Third Party that is unpaid as a volunteer .	
I, _____ whose personal particulars are set out above, authorise the Commissioner of Police or any member or agent of the QPS to:	
<ul style="list-style-type: none"> Check my name against records that are held by the Queensland Police Service (QPS) or are available to them nationally from other Australian Police Services, and I further agree to provide my fingerprint impressions if required for checking purposes, and if I do not have a conviction or if I only have a conviction that cannot be disclosed by virtue of the <i>Criminal Law (Rehabilitation of Offenders) Act 1986 (Qld)</i> to advise the above-named third party that I do not have a conviction that can be disclosed. If I have a conviction that can be disclosed, I authorise the disclosure to the above-named third party of the details of that conviction. I clearly understand that any details disclosed to the above-named third party will be considered by them and may affect any application I have made with them for 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 howsoever against the Crown in the right of the State of Queensland, the Commissioner of Police or any member or agent of the QPS in respect of advice given to a third party or the disclosure or use of information relating in any way to records under the name supplied. 	

10. Application Endorsement

- I have read and I understand the "Volunteering in the RFSQ" brochure.
- I understand that I am engaging as a volunteer Brigade member, which is an unpaid role entered into of my own intention.
- I understand that there is no obligation to perform services for QFD or the RFSQ and that my engagement as a Brigade member and my participation in all RFSQ activities remains at my discretion.
- I understand that I am expected to abide by all safety requirements and instructions and may need to attend training to support my understanding and execution of these requirements.
- I acknowledge that I am not a Brigade member until I have received a welcome letter from the RFSQ.
- I understand a copy of this form may be provided to the Brigade I am applying to join.
- I acknowledge that I am required to undertake all activities with integrity and impartiality; being honest, fair, and respectful and ensuring decisions are unprejudiced, unbiased, and just.
- I agree to care for and return all uniforms and PPE provided to me by RFSQ on conclusion of my membership.
- I understand I must adhere to the following which are available through my local Area Office or the QFD Website:
 - Code of Conduct
 - QFD Privacy Management Policy
 - QFD Statement of Cultural Intent
 - Brigade Management Rules
 - QFD Acceptable Use Policy

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 RFSQ, to participate as a Registered Junior.

- I authorise this young person to travel in Rural Fire Brigade vehicles as necessary to fulfil the requirements of training or operations.
- I have read and I understand the "Volunteering in the RFSQ" brochure.
- I certify that all information declared on this application is true and correct and verify that this young person is over the age of 16.

Signature of Parent /Guardian:		Date:	
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11. Unique Student Identifier (USI)

If you have a USI please provide it here *(Please Print Clearly)*:

12. ID Card Photo

I have included a digital photo for my ID Card *(JPG Format 300 - 600dpi)*:

13. RFSQ Endorsement

- The Brigade has accepted the applicant's membership, subject to RFSQ approval.
- The Brigade acknowledges that the applicant is not a member of the Brigade and not covered by Work Cover or volunteer member insurance until the applicant has received a welcome letter providing their volunteer ID number.

Meeting / Approval Date:		Approved:		Yes		No
Brigade Management Committee Representative and witness:						
Name:		Signature:		Date:		
RFSQ Area Manager Approval						
Name:		Signature:		Date:		
RFSQ Assistant Chief Officer Approval						
Name:		Signature:		Date:		

Area Office Contact Details

Office	Email
Northern Region	RFSQ.NR@fire.qld.gov.au
Mackay Area Office	RFSQ.Mackay@fire.qld.gov.au
Townsville Area Office	RFSQ.Townsville@fire.qld.gov.au
Wet Tropics Area Office	RFSQ.WetTropics@fire.qld.gov.au
Torres Peninsula Area Office	RFSQ.TorresPeninsula@fire.qld.gov.au
Tablelands Area Office	RFSQ.Tablelands@fire.qld.gov.au
Cape York Area Office	RFSQ.CapeYork@fire.qld.gov.au
North West Gulf Area Office	RFSQ.NorthWestGulf@fire.qld.gov.au
Goldfield Area Office	RFSQ.Goldfield@fire.qld.gov.au
Central Region	RFSQ.CR@fire.qld.gov.au
Gladstone Area Office	RFSQ.Gladstone@fire.qld.gov.au
South Burnett Area Office	RFSQ.SouthBurnett@fire.qld.gov.au
Fraser Coast Cooloola Area Office	RFSQ.FraserCoastCooloola@fire.qld.gov.au
Bundaberg Burnett Area Office	RFSQ.BundabergBurnett@fire.qld.gov.au
Central West Area Office	RFSQ.CentralWest@fire.qld.gov.au
Rockhampton Area Office	RFSQ.Rockhampton@fire.qld.gov.au
Central Highlands Area Office	RFSQ.CentralHighlands@fire.qld.gov.au
South Eastern Region	RFSQ.SER@fire.qld.gov.au
Moreton Bay Area Office	RFSQ.MoretonBay@fire.qld.gov.au
Sunshine Coast Area Office	RFSQ.SunshineCoast@fire.qld.gov.au
South Coast Area Office	RFSQ.SouthCoast@fire.qld.gov.au
Somerset Lockyer Area Office	RFSQ.SomersetLockyer@fire.qld.gov.au
Scenic Rim Area Office	RFSQ.ScenicRim@fire.qld.gov.au
South Western Region	RFSQ.SWR@fire.qld.gov.au
Toowoomba Area Office	RFSQ.Toowoomba@fire.qld.gov.au
Dalby Area Office	RFSQ.Dalby@fire.qld.gov.au
Warwick Area Office	RFSQ.Warwick@fire.qld.gov.au
Roma Area Office	RFSQ.Roma@fire.qld.gov.au
Charleville Area Office	RFSQ.Charleville@fire.qld.gov.au



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