

APPLICATION FOR APPOIN A VOLUNTEER MEM	
Volunteer (NTES) Volunteer Fire Volunteer Fire Su	pport Volunteer Fire Cadet
PART 1 - TO BE COMPLETED BY THE APPLICANT Brigade/Unit Loca	tion:
Surname: Given Names:	
Address: (Home)	PCode:
(Postal)	PCode:
Date of Birth:/ Drivers Licence (Current NT): C	lass:
Marital Status: Occupation: Employe	ər:
Employment Address:	Contact
Details: Phone: (Home): (Work): (Mobile):	
E-Mail:	
Do you identify yourself as Aboriginal or Torres Strait Islander YES INO	
Previous Service/Experience/Qualifications: (NTES/Defence/Police/Fire, etc)	
Next of Kin: Relationship:	
Home Address:	Contact:
 I hereby apply for membership of the Northern Territory Fire, Rescue and Emergency S A Criminal History Check 	ervices and agree to;
Abide by the Code of Conduct of the Service.	
 Serve a three month probationary period. Achieve and maintain the minimum training obligation, including manda 	tory training.
 Maintain all equipment issued to me in goodorder. Return all personal equipment including ID card issued to me upon resig Director. 	nation, termination or as directed by the Executive
I agree to render voluntary service to the best of my ability and in accordance with the Rescue and Emergency Services.	policies and procedures of the Northern Territory Fire,
I have attached a <u>certified true copy</u> of my driver's licence (by an Authorised Officer) I have attached 100 points of <u>certified true copies</u> of identification (by an Authorised Officer I have attached a completed criminal history form I have provided <u>certified true copies</u> of certificates/qualifications (by a VFF Captain/Unit Off	
PRIVACY DISCLAIMER	
Northern Territory Fire, Rescue and Emergency Services NTFRES) are collecting information Member" to ensure compliance with the <i>Emergency Management Act and the Fire and Emerg</i> Territory Fire, Rescue and Emergency Services is satisfied with a number of matters relating Director's discharge of their Duty of Care. This collection is required under the <i>Emergency Ma</i> provide this information in full or part may result in your application not being processed or support	gency Act to ensure that the Executive Director Northern to the Volunteer Member appointment and the Executive nagement Act and the Fire and Emergency Act. Failure to
Applicants Signature:	

APPLICANT'S STATEMENT OF PERSONAL MEDICAL HISTORY

Are you now suffering from, or have you ever suffered from, any of the following disabilities?

Yes/No Ye		Yes/No
Nervous fatigue or neurasthenia	Dizziness or turns	
Mental or nervous conditions	Attack of unconsciousness or weakness	
Anxiety state	Anaemia or haemorrhage	
Depression	Recurrent pain in the chest	
Difficulty in sleeping	Hernia (rupture)	
Epilepsy or fits	Asthma	
Persistent Headaches	Discharge from ears or perforated eardrum	
Coronary artery disease	Deafness	
Operation on the heart	Diabetes	
High blood pressure	Skin eruption or rash	
Disease of the heart or blood vessels	Cancer or any kind of tumour	
Any disease of the blood	Bronchitis	
Dyspepsia, disease or ulcer of the stomach or duodenum	Hay fever or allergic rhinitis	
Frequent indigestion or vomiting attacks	Goitre or thyroid disease	
Gall bladder disease	Dermatitis or eczema	
Disease of the liver	Tropical diseases	
Jaundice or hepatitis	Infectious diseases	
Do you wear spectacles	Colour blindness or impairment	
Previous/Recurrent back injury	Other (give details)	

If yes to any of the above, a medical clearance may be requested

Comments (include significant past medical or surgical history):

PART 2 - ENDORSEMENT OF Unit Officer/Local Controller or LFF/OIC or FERG/Rural/Remote Volunteer Captain. (If OIC/LFF of Regional Fire Station has signed here, next signature required in Part 4)		
Application Recommended/Not Recommended		
NAME:		
SIGNATURE: DATE://		
Comments:		
	_	
	_	
PART 3 – ENDORSEMENT OF Area Manager or SSO/SO Northern/Southern Command		
Application Recommended/Not Recommended		
NAME:		
SIGNATURE: DATE:/		
Comments:		
	_	
	_	
PART 4 – ENDORSEMENT OF Regional Manager North/South or District Officer Northern/Southern	Command	
Application Recommended/Not Recommended		
NAME:		
SIGNATURE: DATE:/		
Comments:		
Comments:	_	
Comments:	_	
Comments:	_	
	_	
PART 5 – APPROVAL OF Director NTES or Chief Fire Officer NTFRS	_	
PART 5 – APPROVAL OF Director NTES or Chief Fire Officer NTFRS Application Approved/Not Approved NAME:	_	
PART 5 – APPROVAL OF Director NTES or Chief Fire Officer NTFRS Application Approved/Not Approved	_	

PART 6

NTFRES VOLUNTEER IDENTIFICATION CARD Application Form

Instructions for Volunteers:

- 1. Complete this form
- 2. Sign the signature box in a black permanent marker (not pen); USE THE WHOLE BOX FOR YOUR SIGNATURE
- 3. Attach a digital photograph of yourself (head and shoulders) against a plain background; ensure file is named with your SURNAME then given name (e.g. SMITH Craig).
- 4. Submit completed form and photo file to your Unit Officer/SO Northern Command or LFF/OIC of Regional Station.

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Volunteer Details (please print in capitals)

Full Name:

NTFRES Volunteer Unit/Brigade:

Office Use Only

Volunteer Registration Number:

Signature Box

Instructions for Unit Officer/SO Northern Command or OIC/LFF of Regional Station

- 1. Unit Officer to email the Volunteer application and Criminal History Check to the Area Manager.
- 2. SO Northern or OIC/LFF email Criminal History Check to Referrals and wait for History to be returned.
- 3. Email photograph of volunteer to your Support Fire Northern/Southern or Support NTES Northern.

Instruction for Area Manager and Regional Manager North/South

- 1. Area Manager to endorse and send to Support NTES Northern/Southern to process Criminal History Check and on return forward to Regional Manager North/South.
- 2. Regional Manger to endorse and return to Support NTES Northern/Southern to complete Volunteer application processing and send to Director NTES.

Instructions for Director NTES/NTFRES Executive Director

- 1. Send or hand over signed original form to Support NTES Northem/Southem or NTFRES Executive Assistant.
- 2. NTRES Executive Assistant to email approved form to Support Fire Northern/Southern Command.
- 3. Support NTES Northern/Southern to organise ID Cards through facilities.
- 4. Support NTES Northern/Southern and Support Fire Northern/Southern Command to update relevant databases. TRIM Application to HP Records Manager. Gazette Notice, SMS, SPOK Messenger (Regional Stations) and ICAD.

PF166		
Northern Territory Polic	ce	NORTHERN POLICE AND PROT
_	THORITY TO RELEASE CRIMINAL ORMATION HOLDINGS, INCLUDING SP (Release of information to a Third Pa	ENT CONVICTION
THE NORTHERN TERRITORY PO	FOR USE OF <u>DLICE, FIRE & EMERGENCY</u> SERVICES EES, VOLUNTEERS CONTRACTOR	Date Received: / Receipt No. (For Contractors, FEE applies) Please Note: Please Note: Turn around is within 15 working days.
Please use BLOCK LETTER	S	
*(Mr./Mrs./Miss/Ms)	(Family Name)	(Given Names)
*Maiden Name	(Family Name)	· · · · · ·
	r names by which known/or previous names legally he	
*Born on//at	(Town/City, State, Country)	Sex: M / F
*of (Full & current Residential Addre	ess)	
		Postcode
*Telephone Number (Work)	(Home)	(Mobile)
	e past five (5) years, including the Northern ddresses. *Write <i>N/A</i> if not applicable.	Territory, all Australian States and
Period		Full Address
//to/.	1	
//to/.		
//to/.		
//to/.		
Applicant must present the and have copies certified b	e original of two of the following th y an Authorised Officer	hree identification types
1) Driver's Licence/18+ CardNo.	St	tate/Territory of Issue
2) PassportNo	Pl	ace of Issue
3) Birth Certificate/Extract No		ace of Issue

I HEREBY CONSENT to a check of criminal records, or other information, kept by the Northern Territory Police of Australia interstate and overseas police services, and release of details of any convictions, or other information, INCLUDING, pursuant to section 15 of the Criminal Records (Spent Convictions) Act 1992, convictions which are "spent convictions" under the Criminal Records (Spent Convictions) Act 1992, recorded against my name, either in the

Northern Territory of Australia or elsewhere.

Name and Postal Address of the Manager (NTPFES) to whom the Criminal History result is to be forwarded to:

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For the purpose of (Mandatory Field)

: (Position or type of work /Designation/place where work will be performed in PFES)

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AND IN SO DOING, hereby indemnify the Northern Territory of Australia, its servants and agents against all liabilities and against all actions, suits, proceedings, claims, demands, costs, and expenses whatsoever which may be taken or made in respect of the release or use hereunder of any details of any convictions, or other information purporting to either relate to or involve me. (See over for Privacy Statement)

Applicant's Name:	Applicant's Signature:
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Authorised Officer: (refer to the reverse page Instructions 'd' definition of Authorised Officer)

(Name and Designation/Rank/Reg No.)	Signature:
Station/Section/Unit:	Telephone Number:

Date: / /.....

INSTRUCTIONS

Please ensure that:

- (a) All details are printed clearly in ink.
- (b) All sections of the form are completed.
- (c) No wording of this form is altered in any way.
- (d) Attend a Police Station or SAFE NT Office (37 Woods Street Darwin) and produce the original documents for identification purposes. No photocopied Documents or facsimiles will be accepted.

* Applicant must present the original of two of the following three identification types and to be photocopied and certified as True copies by an Authorised Officer. (Authorised Officers are NTPFES Employees and Interstate or Overseas Police Officers, or Justices of the Peace).

- 1) Driver's Licence/18+ Card 2) Passport
- 3) Birth Certificate /Extract
- (e) The application form is signed by the applicant in the presence of the Authorised officer.
- (f) No payment is required for NTPFES prospective employees & volunteers' applications for Criminal history check. For any further enquiries, please contact SAFE NT on Ph: (08) 8985 8985

Please forward the completed application form and certified copies of ID documents to:

Manager SAFE NT (internal Courier) or PO Box 39764 Winnellie NT 0821

EXCLUSIONS IN RELATION TO SPENT CONVICTIONS

Criminal Records (Spent Convictions) Act - Section 15

Section 11 and 13 of the Act do not apply in relation to the following. This means that Spent conviction is required to be disclosed for the purpose of:

- a) Applications for appointment to or employment as a Judge, Magistrate, Justice of the Peace, Police member, Prison Officer, Parole Officer, Probation Officer Youth Justice Officer, Youth Detention Centre/Worker home Detention Surveillance Officer or Community service order, Supervising Officer.
- b) Omitted
- c) Application for appointment as Fire Fighting or engage in Fire Prevention where spent conviction is with respect to offences relating to Arson or Attempted Arson.
- d) Request made by a public authority to determine whether a Person's licence, permit or registration can be granted, re- issued or revoked under the *Firearms Act*, if the Spent conviction is with respect to offence relating to Violent Offence.
- e) Considering a person's suitability to become a Juror.
- f) Disclosure of spent conviction in court, where the court is in the opinion that in the interest of justice, and at a given circumstances, spent conviction is required to be published.
- g) Person making application for an operator's or manager's licence under the *Prostitution Regulation Act* (Refer S24 (3)) are exempt with respect to any previous disqualifying offence or an attempt to commit such an offence.

Section15A (Exclusions in relation to Spent Records)

1) Section 11 and 13 also do not apply in relation to spent record of a person making an application for appointment or employment to do work principally involving the care, instruction or supervision of vulnerable persons.

Private Security Act - Section 16

<u>Crimes Act</u> - Section 85 ZZH (G) Defence Force

PRIVACY STATEMENT

Northern Territory Police, Fire and Emergency Services (NTPFES) is collecting information on a PF166 authority to release criminal history to ensure that the correct person is entitled to receive the criminal history report. This collection is authorised or required by the *Northern Territory Criminal Records (Spent Convictions) Act*. The information provided on this form is only used to identify the applicant for the purpose of providing a criminal history check. Failure to supply any material requested will result in your application not being processed.

ATTACH 'CERTIFIED CORRECT' PHOTOCOPY OF ORIGINAL DOCUMENT, PROOF OF IDENTIFICATION

POLICE USE ONLY

A name check only has been conducted within the Northern Territory.

] The above name appears / does not appear recorded.

A fingerprint check has been conducted.

Attach is a copy of the record.