

# **NSW RURAL FIRE SERVICE Membership Application Form**

Thank you for considering becoming a member of the NSW Rural Fire Service.

NSW RFS is the largest volunteer fire service in the world and has a proud history of volunteering for more than 100 years.

This application form is the first step in the process of becoming part of the Service. After completing all the essential information on the application form please submit the form at your local brigade or fire control centre.

You will be contacted for an interview where you can discuss what volunteering involves and learn more about the NSW RFS.

If you are over 16 years of age you will also need to complete the National Police Checking Service Application/Consent form. This means you are consenting to the Service undertaking a criminal history record check. The Service will protect your privacy in dealing with such information.

If your application is successful, the Service advises you by way of a letter. This letter is sent to you and you should pass this to the relevant brigade Captain.

If your application is unsuccessful you will also be advised of this in writing.



## **NSW RURAL FIRE SERVICE**

## **VOLUNTEER MEMBERSHIP APPLICATION FORM**

All sections of this form are compulsory and must be completed except for Section 7 – Information for Statistical Purposes

Section 1: Type of Application: (please select)	Office Use Only Member No.
New Member Brigade you wish to joi	n:
Junior/Cadet Member (12 to 16 yrs) Brigade you wish to joi	n:
Community Fire Unit (CFU)  Brigade you wish to joi	n:
Junior/Cadet to 16yr+ Member Existing Brigade:	
New Brigade (if applicate	ole):
Rejoining Member Former Brigade:	New Brigade:
Transferring Member From Brigade:	To Brigade:
Dual Member Existing Brigade:	Additional Brigade:
Section 2: Personal Details	
Gender: Male Female	Date of Birth:
Title: Given Name(s):	Surname:
Address:	Suburb:
State: Postcode:	Email address:
Home No: Work No:	Mobile No:
Section 3: Emergency Contact Details	
Name of Contact:	Relationship to Applicant:
Phone: (Business Hours)  Phone: (After Hours)	Mobile No:

Section 4: Medical Information						
Are you aware of any medical condition that could adversely affect your safety or the safety of others while participating in NSW RFS activities including emergency operations?						
	Yes No					
If you ar	nswer yes to this section, please provide details.					
Sectio	on 5: Child Related Activities					
	u ever had any reportable conduct as defined in section 33 of the <i>Commission for Children and Young People Act 1998</i> of the Commissioner for Children and Young People (CCYP)?					
	☐ Yes ☐ No					
Reportab	ble conduct means:					
	any sexual offence, or sexual misconduct, committed against, with or in the presence of a child, or					
(a) (aa1)	any offence or misconduct involving child abuse material (within the meaning of Division 15A of Part 3 of the Crimes					
(a1)	Act 1900), or any child pornography offence or misconduct involving child pornography, or					
(a2) (a3)	any child-related personal violence offence (within the meaning of Division 2), or an offence under section 91J, 91K, 91L or 91M of the <u>Crimes Act 1900</u> committed against, with or in the presence of a					
(a4)	child, or an offence that was reportable conduct at the time that it was committed, or					
(b)	any assault, ill-treatment or neglect of a child, or					
(c)	any behaviour that causes psychological harm to a child, whether or not, in any case, with the consent of the child.					
Reportat	ble conduct does not extend to:					
(a)	conduct that is reasonable for the purposes of the discipline, management or care of children, having regard to the age, maturity, health or other characteristics of the children and to any relevant codes of conduct or professional standards, or					
(b)	the use of physical force that, in all the circumstances, is trivial or negligible, but only if the employer is an agency to which Part 3A of the Ombudsman Act 1974 applies and the matter is to be investigated and the result of the					
(c)	investigation recorded under workplace employment procedures, or conduct of a class or kind that is exempted from being reportable conduct by the guidelines under section 35.					
ii you ar	nswered yes to this section, please provide details.					
Sectio	on 6: Rural Fire Service Association (RFSA)					
-000110	The service recognition (Fit Cri)					
ι	and work to be some a march or of the NOW B. 15' O. 1. A. 1. "					
ıt you <b>do</b>	o not want to become a member of the NSW Rural Fire Service Association please cross this box					

(If you do not tick this box, your name, address and telephone number will be disclosed to the RFSA). For more information please

visit: www.rfsa.org.au

Membership Application, June 2012 Page 2 of 5

## Section 7: Information for Statistical Purposes (Completion of this section is voluntary)

Are you: Aboriginal?	Yes No
Torres Strait Islander?	Yes No
Both?	Yes No
Are you from a racial, ethnic or migrant background?  If yes:	Yes No
a. Where were you born?	a
b. Where were your parents born?	b
c. What language/s do you speak at home?	C.
d. What cultural group/s do you identify with?	d
Are you a person with a disability?  You should answer 'yes' if you have any one or more of the limitations or restrictions listed below:  • A long term medical condition or ailment  • Disfigurement or deformity  • Speech difficulties in your native language  • A psychiatric condition  • Head injury, stroke or any other brain damage  • Loss of sight or hearing  • Incomplete use of any part of your body  • Restriction in physical activities or physical work  • Blackouts, fits or loss of consciousness	Yes No
Are you a member of another volunteer organisation?  If yes, please state the type of volunteer organisation.	Yes No  Emergency Service Arts / Heritage Sport and physical recreation Religious Welfare / community Education and Training Parenting, Children and Youth Other

### Section 8: Applicant Declaration:

Family Name (current)	Given Name (current)	

- 1. Understand that (for applicants 16 years of age and over) part of my application for volunteer membership with the NSW RFS includes the completion of a National Police Checking Service (NPCS) Application/Consent Form.
- 2. Acknowledge that I have read the Spent Convictions Schemes section of the NPCS Information sheet and understand that Spent Convictions legislation (however described) in the Commonwealth and many States and Territories protects "spent convictions" from disclosure, except in certain circumstances (for example sexual offences) or when a partial exclusion is obtained, such as that obtained by the NSW RFS in relation to offences concerning arson or attempted arson (Section 15(2) Criminal Records Act 1991 (NSW)).
- 3. Consent to the NSW RFS conducting a disciplinary record check pertaining to my past and /or current membership or employment within NSW RFS, and if relevant, with other emergency services.
- 4. Acknowledge that any information provided by me on this application form, or the National Police Checking Service (NPCS) Application/Consent Form, or by the Australian police services or other emergency services, may be taken into account by the NSW RFS in assessing my application for and ongoing membership of the NSW RFS, including, but not limited to, whether my membership should be terminated.
- 5. Have read and agree to abide by the conditions of the NSW RFS Service Standard 1.1.7 Code of Conduct and Ethics, available on the NSW RFS website (<a href="www.rfs.nsw.gov.au">www.rfs.nsw.gov.au</a>) under Publications Law and Policy Service Standards & Policies, or from your local brigade or Fire Control Centre.
- 6. Acknowledge and agree to my personal information, which is collected by the NSW RFS at the time I apply for membership using this form or when I provide updated information, being used to assess my application. If my application is successful, my personal information (including medical information) may be disclosed to District Office staff, and group and brigade officers for operational and statistical purposes. My name, address and telephone details may also be disclosed to other members of the NSW Rural Fire Service.
- 7. Consent to the information contained in this application being stored in the brigade register, in the NSW Rural Fire Service's Membership Record Keeping system. I am aware that District Office staff and group and brigade officers have access to these records. I am aware that all persons with access to my information must comply with Service Standard 1.1.14 Personal Information and Privacy. I understand any information received from NPCS pertaining to me will be retained by the NSW RFS for a period of three (3) months.
- 8. Acknowledge that I am not required to provide any personal information, however, if I choose not to provide the information required to assess my application, my application will not be processed.
- 9.I agree to be bound by the Brigade Constitution and to comply with the provisions of the *Rural Fires Act, Rural Fires Regulation*, the Service Standards and the directions of officers of the NSW RFS. I understand that contravention of the Act, Regulations or failure to comply with a Service Standard may result in disciplinary action.

Applicant Signature:	Date:	1	1
Applicant Signature.	Date.	,	,

Note: The information you provide on this, and the NPCS Application/Consent form, and which the CrimTrac Agency provides to the NSW RFS on receipt of the form, will only be used for the purposes stated above unless otherwise required by law.

### Section 9: Parental Consent (required for applicants under 18 years of age):

If your child is applying for membership and is 16 to 18 years, by signing this section you are consenting for them to participate in normal brigade activities. Normal brigade activities can include attending fires and other emergencies as well as other approved brigade activities. If you would like more information please contact the brigade captain.

If you do not wish your child to participate in these activities, junior or cadet membership (whichever applicable) should be selected in Section 1.

#### Parent/Guardian:

Print Name Signature Date

Thank you for your application. Please return this form to your local brigade or Fire Control Centre.

All applicants 16 years and over must also complete the National Police Checking Service (NPCS)

Application / Consent Form which forms part of this application.

### Section 10: Brigade Validation (to be completed by the àrigade) **Applicant Name:** Does the brigade have cadets? No Yes. If yes, please consider the information provided in section 5 of the application. All current and prospective members of cadet brigades must also complete a Commissioner for Children and Young Persons (CCYP) Volunteer Declaration form. These forms are accessible directly from CCYP at https://check.kids.nsw.gov.au/volunteer-declaration.php or from the Membership Coordination Unit (MCU). Brigade SAP No: Fire Control Centre - District / Team / Zone: Region: North South West East Section 11: Confirmation of Interview Date of Interview: Location: Panel Member: Name Signature Position Panel Member: Signature Position Name Panel Member: Name Signature Position Interview Comments (optional): If medical information has been disclosed (refer Section 4 of this application), has due consideration been given by the brigade to this medical condition and can this be accommodated? Not Applicable Yes No Does the brigade accept the applicant as a probationary member subject to MCU clearance? Yes Signature: Name: Position: Section 12: District Validation (to be completed by District Manager) I verify the information required on this application form and agree to list this person as a probationary member following clearance by the Membership Coordination Unit. District Manager Name: Signature: Please return form to: 02 8741 5236 **NSW Rural Fire Service - Membership Coordination Unit** 02 8741 5269 Reply Paid 67059, GRANVILLE NSW 2142 Email: mcu@rfs.nsw.gov.au MCU use only Officer: Date processed:

## NATIONAL POLICE CHECKING SERVICE

SECTION 1: PERSONAL IN	FORMATION					
Please select appropriate box only:						
Employee Contractor/Consultant Volunteer Individual Other (Please specify)						
Is this a renewal check? Yes	□ No					
Names by which I am, or have bee	en, known					
If more room is required, list on a se	parate sheet, sign and attach the sheet to	this form.				
Additional sheet included?	s No					
Surname	e		Act III.			
(Primary)	First		Middle			
Surname Maiden Alia	First Previous		Middle			
Surname	First		Middle			
Maiden Alia	as Previous					
Date of birth / / dd mm yyyy	Sex Male Female	Unspec	ified			
Place of birth						
Suburb/Town	State/Territory					
Country						
Permanent residential address over	er the last five years					
If more room is required, list on a seinformation as possible.	eparate sheet, sign and attach the sheet to	this form. If fu	ıll details are unavailable, include as much			
Additional sheet included? Yes	s No					
Current			Period of residence			
Number/Street			/ / to / /			
Suburb/Town	State/Territory Postcod	e	Country			
Previous (if applicable)			Period of residence			
Number/Street			/ / to / /			
Suburb/Town	State/Territory Postcod	e	Country			
Previous (if applicable)			Period of residence			
Number/Street			/ / to / /			
Suburb/Town	State/Territory Postcod	e	Country			
Contact details						
Phone Home	Work		Mobile			
Email						
Other details (if applicable)						
Australian driver's licence no.		Issued by				
Firearms licence no.		Issued by				

### **NATIONAL POLICE CHECKING SERVICE**

#### **SECTION 2: PROOF OF IDENTITY**

#### Documents must be selected from the list below

When applying for a National Police History Check, you must provide proof of your identity with this form (see Minimum Identity Requirements below). All documents must be originals or certified true copies. A certified copy means a document that has been certified as a true copy of an original by a person listed in Schedule 2 of the *Statutory Declarations Regulations 1993* (Cth) which is available from <a href="http://www.comlaw.gov.au">http://www.comlaw.gov.au</a> by searching for "Statutory Declarations Regulations 1993".

#### **Change of Name**

If all documents provided for 100 points are under the same name you will not be required to provide additional ID documentation if you provide a maiden/alias name. If the 100 points provided are under two or more different names (e.g. birth certificate in maiden name and driver's licence in married name) then further ID documents will need to be provided as evidence of a name change (e.g. Change of Name or Marriage Certificate issued by a State or Territory Registry of Birth, Deaths and Marriages, or Divorce Papers issued by the Family Court). These documents must be originals or certified true copies and DO NOT count towards the 100 Points. If you use a change of name document you must have provided the other names you have used in section 1 of this form.

#### **Minimum Identity Requirements**

You must provide:

- at least one document from either Category A or Category B, that is, you do not need to provide documents from both categories as long as all other minimum requirements are satisfied;
- at least one of your identity documents must contain a photograph. If you are unable to provide a listed document containing a
  photograph you must submit a passport style photograph of yourself certified by a person listed in Schedule 2 of the Statutory
  Declarations Regulations 1993 (Cth);
- the combination of documents supplied should, as a minimum equal a total of 100 points; and
- evidence of your full name and date of birth.

Document	Points Scored
Category A—Each document is worth 70 points  Birth Certificate  Australian Passport (current, or expired within the previous two years, but not cancelled)  Australian Citizenship Certificate  International Passport (current, or expired within the previous two years, but not cancelled)  Other document of identity having same characteristics as a passport e.g. diplomatic/refugee (Photo or Signature)  Category B—The first document is worth 40 points and each additional document is worth 25 points  Current Licence or Permit (Government Issued)  Working With Children/Teachers Registration Card  Aviation Security Identification Card/Maritime Security Identification Card  Public Employee Photo ID Card (Government Issued)  Department of Veterans' Affairs Card  Centrelink Pensioner Concession Card or Health Care Card  Current Tertiary Education Institution Photo ID	
<ul> <li>Reference from a medical practitioner (must have known the Applicant for a period of at least 12 months)</li> <li>Category C—Each document is worth 25 points</li> <li>Birth Extract</li> <li>Foreign/International Drivers Licence</li> <li>Proof of Age Card (Government Issued)</li> <li>Medicare Card/Private Health Care Card</li> <li>Council Rates Notice</li> <li>Property Lease/Rental Agreement</li> <li>Property Insurance Papers</li> <li>Australian Tax Office Assessment</li> <li>Superannuation Statement</li> <li>Seniors Card</li> <li>Electoral Roll Registration</li> <li>Motor Vehicle Registration or Insurance Documents</li> <li>Professional or Trade Association Card</li> <li>If relied upon, the following documents must be from different organisations:</li> <li>Utility Bills (e.g. Telephone, Gas, Electricity, Water)</li> <li>Credit/Debit Card</li> <li>Bank Statement/Passbook</li> </ul>	

## NATIONAL POLICE CHECKING SERVICE

SPECIAL PROVISIONS ONLY TO BE USED IF MINIMUM IDENTITY REQUIREMENTS ABOVE CANNOT BE MET							
Applicant Category		Document		Points Value	Points Scored		
	cent Arrival - have been in Istralia for 6 weeks or less  Current passport and proof of date of arrival						
Aboriginal people, Torres Islander people or reside remote area/community		Please complete the <i>National Police Checking Service (NF Proof of Identity (Special Provision) for Aboriginal and Tol Strait Islander People</i> and attach it to this document		100			
Child under 18		<ul> <li>Please provide one of the following documents:</li> <li>Birth Certificate/Birth Extract</li> <li>Australian Passport (current, or expired within the procession of two years, but not cancelled)</li> <li>Australian Citizenship Certificate</li> <li>International Passport (current, or expired within the previous two years, but not cancelled)</li> <li>Other document of identity having same characterist passport eg. diplomatic/refugee (Photo or Signature)</li> <li>Statement from an educational institution, signed by the Principal or Deputy Principal, confirming that the child attends the institution (statement must be on t institution's letterhead)</li> </ul>	e tics as a ) /	100			
		TOTAL POINTS					
				Total points scored			
NOTE: To be completed by the Accredited Organisation or its Customer (as defined in the Australian Criminal Intelligence Commission Terms of Service).  I declare that I have sighted the Applicant's original or certified true copy of documents and that the Applicant has met the Minimum Identity Requirements above. I am satisfied as to the correctness of the Applicant's identity.  Signature  Printed name  Date							
SECTION 3: ACCREI	DITED OF	GANISATION DETAILS					
Accredited Organisation (Legal name)	NSW Rural	Fire Service		ABN 25	5 003 129 221		
Address	15 Carter Street Lidcombe NSW						
SECTION 4: ACCREI	DITED OF	GANISATION NOTES (OFFICE USE ONLY)					
Notes							
SECTION 5: AUTHORISATION TO DISCLOSE PERSONAL INFORMATION							
Is the result of the National Police History Check to be forwarded/disclosed only to the Accredited Organisation named in Section 3 above?							
Yes No If No: I authorise the result of the National Police History Check to be forwarded/disclosed to the following employer/ organisation to assess my suitability:							
Employer/Organisation (Legal name)		Fire Service		ABN 2	5 003 129 221		

### **NATIONAL POLICE CHECKING SERVICE**

#### SECTION 6: PURPOSE OF THE NATIONAL POLICE HISTORY CHECK

Provide details of the purpose for which the check is required. Such as relevant position/role, place of work and whether you have contact with vulnerable groups e.g. Client Services Officer in a call centre, janitor at a school, volunteer in aged care facility with direct care of disabled and aged persons.

Purpose or Role

NSW RFS volunteer. May participate in child related activities.

### **SECTION 7: GENERAL INFORMATION**

#### **General information**

Australian Criminal Intelligence Commission (ACIC) is collecting your personal information in this form in order to conduct a National Police History Check (NPHC) on you. It does this through a contractual arrangement with the Accredited Organisation named at Section 3. ACIC has contractual arrangements with its Accredited Organisations to collect personal information on its behalf to support processes assessing the suitability of people applying for employment, Australian citizenship, appointment to positions of trust, volunteer service or for various licensing or registration schemes. Accredited Organisations and their customers (such as employers) use the personal information collected on this form and the resulting NPHC as part of their assessment process to determine your application. Some Accredited Organisations have a legislative basis for the collection, use and disclosure of your personal information.

ACIC recommends that you seek further information about any relevant/applicable legislative framework from the Accredited Organisation.

In some circumstances Accredited Organisations may have arrangements with overseas entities for administrative or other purposes. ACIC recommends that you seek further information from the Accredited Organisation at Section 3 in circumstances where your information is likely to be disclosed to overseas recipients.

Unless statutory obligations require otherwise, the information provided on this form will not be used without your prior consent for any purpose other than in relation to the assessment of your suitability; or to maintain the records of ACIC and police agencies; or for law enforcement purposes. You will be required to complete another consent form for any future NPHCs.

### **National Police History Check (NPHC)**

Information on this form will be used by ACIC and police agencies for checking action; it will also be used to update records held about you by ACIC and police agencies.

ACIC and police agencies will access their records to obtain and disclose Police History Information (PHI) that relates to you to:

- a) the Accredited Organisation named in Section 3 above; and
- b) where applicable the employer/Organisation named in Section 5 above.

PHI may include outstanding charges, warrant information and criminal convictions/findings/pleas of guilt recorded against you.

PHI is disclosed according to applicable laws of the relevant jurisdiction and, in accordance with the relevant jurisdiction's information release policies. Applicable laws include but are not limited to spent convictions legislation.

The following links may be helpful in sourcing information on spent convictions in your State/Territory:

Commonwealth <a href="www.comlaw.gov.au">www.comlaw.gov.au</a>
New South Wales <a href="www.legislation.nsw.gov.au">www.legislation.nsw.gov.au</a>
Queensland <a href="www.legislation.gov.au">www.legislation.gov.au</a>
Victoria Police <a href="www.police.vic.gov.au">www.police.vic.gov.au</a>
Western Australia <a href="www.slp.wa.gov.au">www.slp.wa.gov.au</a>

Northern Territory <u>www.nt.gov.au/dcm/legislation/current.html</u>

Australian Capital Territory

Capital Territory <u>www.legislation.act.gov.au</u>
Tasmania <u>www.thelaw.tas.gov.au</u>

#### Limitations on accuracy and use of PHI

While every care has been taken by ACIC and police agencies to conduct a search of PHI that relates to the Applicant, the accuracy and quality of an NPHC issued by ACIC depends on accurate identification of the Applicant (including aliases), the comprehensiveness of police records and is based on the information provided in this form. If the Applicant does not complete the information requirements in this form the success and validity of the NPHC will be compromised. It is in your interest to provide full and complete details in this form.

If for any reason you do not agree with the results of your NPHC, please notify the Accredited Organisation that submitted the request for a NPHC on you so that the NPCS dispute process can be initiated.

#### **ACIC** contact details

For more information regarding the NPHC process or the handling of Personal Information and Police History Information, you can contact the ACIC's National Police Checking Service on:

Phone: 02 6268 7900 Email: npcs@acic.gov.au

### Provision of incomplete, false or misleading information

An Accredited Organisation and an Applicant must take reasonable steps to ensure that the personal information collected or disclosed is accurate, complete and up to date.

You are asked to certify that the personal information you have provided on this form is correct.

It is a serious offence to provide false or misleading information on this form.

## NATIONAL POLICE CHECKING SERVICE

Parent/Guardian name printed in full

SI	ECTI	ON 8: CONSENT TO O	BTAIN PERSONAL INF	ORM	ATION			
		Police History Check ETTERS)						
l,							hereby:	
,	Surn	ame (Primary)			First and middle (Primary)		•	
1.	acco	_	tion and information release		this form and understand that inform ss (including spent convictions legislat			
2.	understand that the purpose for which I am seeking a NPHC may be in a category for which exclusions from spent convicitons legislation may apply;							
3.	have fully and correctly completed this form, and the personal information I have provided in it relates to me, contains my full name and all names previously used by me;							
4.	ackn	owledge that the provision of	false or misleading informat	ion on	this form is a serious offence;			
5.	acknowledge that the Accredited Organisation named in Section 3 of this form is collecting information in this form to provide to Australian Criminal Intelligence Commission (ACIC) (an Agency of the Commonwealth of Australia) and police agencies;							
6.	cons	ent to:						
	(i)	ACIC and police agencies usi	ng and disclosing my persona	al infor	mation to conduct a National Police H	listory Check;		
	(ii)		=		e History information that can be discl dance with the relevant jurisdiction's i			
	(iii)	ACIC disclosing the informat and	ion sourced from the police a	agencie	es to the Accredited Organisation nam	ned in Section 3 o	f this form,	
	(iv)	_			closing to the employer/organisation the purpose identified in this form.	named in Section	5 of this	
7.	ackn	owledge that any information	provided by me on this form	relate	es specifically to the purpose identified	d in Section 6 of t	his form;	
8.		owledge that any information form;	provided by the police agen	cies or	ACIC relates specifically to the purpos	se identified in Se	ection 6 of	
9.		owledge that any information wn risk and I am aware of the			elation to this form, including any iden f lodgement;	ntity documents, i	s sent at	
10.					y be disclosed to the Accredited Orga Ilia or overseas (refer to attached list i			
11.	. acknowledge that it is usual practice for an Applicant's personal information to be disclosed to police agencies for law enforcement purposes including the investigation of any outstanding criminal offences.							
		e information you provide on therwise.	this form will be used only	for the	purpose stated above unless statuto	ory obligations		
Арі	olican	t's Signature				Date / dd m	/ nm yyyy	
Par	ent/G	iuardian Consent—If you are	under 18 years of age provid	e conse	ent below from a parent /guardian.	]		
						,		
Par	ent/G	uardian Signature				Date/ dd m	m yyyy	
							уууу	