



Competent Firefighter Transfer

EXPRESSION OF INTEREST

Section 1 – Personal Details

Name of Applicant:			
Date of Birth:		National Insurance Number:	
Home Address:			
Telephone numbers:	Home: Work: Mobile:		
Email Address:			
Current Role:			
Location: Station/ Watch/Dept:			
Current UK Fire Service :			
Length of Service:			
Do you currently provide On-Call provision for another UK Fire Service? If so, please state who:			
Do you hold a current UK Driving Licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you hold a current LGV Licence?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Section 2 – Equality Act 2010

Where required or identified, Fire and Rescue Authorities will consider what reasonable adjustments could be made to enable you to proceed with your application, provided any such adjustments do not contravene Health and Safety Legislation.

Do you identify as having a disability or feel that you have a specific need that you wish to be taken into consideration?

Yes <input type="checkbox"/>	No <input type="checkbox"/>
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This section provides you with an opportunity to evidence your career progression to date, and commitment to continuous professional development towards the role for which you are applying.

Section 3 – Qualifications			
Relevant Professional Qualifications – Eg: IFE etc			Date
Relevant In-Service Training:	Yes	No	Date
Swift Water Resce	<input type="checkbox"/>	<input type="checkbox"/>	
Animal Rescue	<input type="checkbox"/>	<input type="checkbox"/>	
High Line Rescue	<input type="checkbox"/>	<input type="checkbox"/>	
BA Team Leader	<input type="checkbox"/>	<input type="checkbox"/>	
SRBO	<input type="checkbox"/>	<input type="checkbox"/>	
USAR	<input type="checkbox"/>	<input type="checkbox"/>	
HVP Operator	<input type="checkbox"/>	<input type="checkbox"/>	
Hook Lift Operator	<input type="checkbox"/>	<input type="checkbox"/>	
ALP/TL/CARP	<input type="checkbox"/>	<input type="checkbox"/>	
EFAD	<input type="checkbox"/>	<input type="checkbox"/>	
LVED	<input type="checkbox"/>	<input type="checkbox"/>	
Trailer Towing	<input type="checkbox"/>	<input type="checkbox"/>	
Other In-Service Training:			Date

Continue on separate sheet if required

Section 4 – Personal Statement

With reference to the advertisement, state how your skills, knowledge and/or experience make you a suitable applicant for this position.

(Word count: maximum 500 words)

Section 5 – References

If successful at initial sift you will be asked to provide two referees from the following:

1. Your current Head of Department/Division:

Name:	
Telephone:	
Email:	

2. Other current In-Service professional:

Name:	
Telephone:	
Email:	

Section 6 – Lincolnshire Fire and Rescue Values

We value Service to the Community by

- Working with all groups to reduce risks
- By being committed and working together in unity
- Treating everyone fairly and with respect
- Being accountable to those we serve
- Providing dynamic and effective leadership

We value all our people by practicing and promoting

- Fairness, respect and a willingness to forgive
- Recognition of merit and acceptance of challenge
- Openness, honesty, integrity and mutual trust
- Personal development and learning
- Co-operative and inclusive working and empowering everyone to do their job
- A positive attitude and remembering to have fun at work

We value Diversity in the Service and the Community by

- Treating everyone with dignity and respect
- Being innovative, providing varying solutions for different needs and expectations
- Promoting equality of opportunity in employment and progression within the Service
- Challenging prejudice and discrimination and celebrating our differences

We value Improvement at all levels of the Service by

- Taking responsibility for our performance and celebrating our success
- Being open-minded and visionary
- Listening and responding to feedback positively
- Considering criticism thoughtfully and learning from others
- Consulting, communicating and engaging with others
- Being courageous in all we do

I have read and understood the Fire and Rescue Service Core Values and will commit to practice and actively promote them.

Yes ☐

No ☐

Section 7 - DECLARATION

1. I confirm that I have completed this application form and to the best of my knowledge the information I have provided in it is true, accurate and correct.
2. I understand that proof of my competencies and evidence of my qualifications will be required during the selection process.
3. I agree to the information in this form being stored for the purposes of my application, for monitoring and for reasonable research into the application process, in accordance with the Data Protection Act.

Signed		Date	
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FIREFIGHTER TRANSFEREE COMPETENCE RECORD

FF NAME & SERVICE NO:

CURRENT FIRE & RESCUE SERVICE:

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
BREATHING APPARATUS					
General check/ set design					
General check/ set design, EDBA					
Duties of a BA Wearer					
Door Entry Procedures					
Search Procedures					
Stairs Procedure					
Casualty Locating and Handling					
Hose Management					
Guidelines: Traversing and searching off					
Guidelines: Lay, extend, secure and terminate					
Emergency Procedures					
BA Set Removal					
BA Entanglement					
Entry Control Procedures					
Branch Techniques					
Tactical Ventilation - Practical					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
EXTRICATION & RESCUE					
Safety and Scene Assessment					
Stabilisation.					
Initial Access					
Glass management.					
Space creation.					
Full access					
Immobilisation and Extrication					
Lifting and Moving (Air Mats)					
Winching Operations					
Patient Assessment					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
FIRE SERVICE PUMPS					
Major Pump					
Light Portable Pump Pressure Fed					
Firefighting Foam					
Major Pump using Augmented Supply					
Major Pump Using Open Water					
Light Portable Pump Using Open Water Supply					
Water Relays					
Pump Operator Communications					
Cobra (if applicable)					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
WATER RESCUE					
Working near water and unstable ground.					
Rescue techniques from water					
Wading techniques					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
WORKING AT HEIGHT					
7m/9m Ladder Pitches					
7m/9m Bridging					
13.5m Ladder Pitch Straight					
13.5m Ladder Pitch Restricted Space					
13.5m Ladder Pitch Over an Obstacle					
Short Extension Ladder					
Roof Ladder					
Ascending/descending Ladders					
Working off a Pitched Ladder					
Hauling Equipment Aloft					
Casualty Walk Down					
Time Critical Rescue					
Station Rope Rescue					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
HAZARDOUS MATERIALS					
Snatch Rescue					
Decontamination Procedures					
Gas Tight Suits: Dressing / Disrobing					
Gas Tight Suits: Wearing					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
COMMAND & CONTROL					
Airwave radio and message procedures					
Command support					
Information gathering					
Incident ground radio					

CORE SKILL	COMPETENT: Y/N	COMMENTS	SIGNING OFFICER NAME	SIGNATURE	DATE
CASUALTY CARE					
AED					
Airway Management					
Basic Life Support					
Casualty Immobilisation					
Oxygen Therapy					
Casualty Assessment					
Wounds and Bleeding					

I confirm that the candidate named above has been assessed within the last 12 months against all the standards for core skills in line with those required by our Training Department and accept accountability that the candidate is competent in the areas designated above. I also confirm the candidate has no current development needs or disciplinarys outstanding.

Signed:..... Print Name:..... Role:.....

Service Number:..... Department:..... Date:.....