Illinois Promotional Assessor Profile

Appendix #1

Assessor Requirements: Assessors shall possess a minimum of ten (10) years of service as a full-time sworn firefighter including at least three (3) years of service as a fire officer at the rank of company officer or higher. Persons who do not have experience as a sworn full-time firefighter who are interested in serving as assessors and who have specialized technical expertise may be added to assessment panels by agreement of the parties to a collective bargaining agreement at the local level.

Date Profile Completed:												
Contact Information (Please note that this page will be posted on the OSFM Website)												
Las	ast Name First Name				lame	If Applicable: Name of Department/Business						
If Applicable: Department/Business Mailing Address				ng Address	City State			State	Zip County			
Email address:				С	Contact Phone Number (not mandatory to provide on the page)							
	<u> </u>											
Fi	Fire or EMS Employment Status (Please check one)											
Fu	II Time		Combination		Volunteer		Part Time		Retired		Consultant	
							•					
Fi	Fire or EMS Position (Rank)											
	Name of Organization				Position Title			Dates of Position				
1												
2												
3												
4												
De	escribe	You	r Duties ar	d Re	sponsibili	ities	of your P	ositi	ons			
	Pos	ition		Overview of Duties and Responsibilities								
1												
2												
3												
4												

Breadth of Supervisor and/or O	Cu	rrent	Past					
Number of full-time employees I su								
Number of employees I supervise								
				'	-			
Education (only accredited instituti	ons and a c	opy of your	degree mus	t be attacl	ned)			
Degree		ollege/Unive			Major			
		•	•		•			
Fire/EMS Service Certifications (A copy of your certificates must be attached)								
Title	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		chool or Orga			Date		
						 		
Special Skills:								
•								
- · · ·			• • • • • • • • • • • • • • • • • • •					
Describe Your Assessor Training	g and Orga	nization \	wno Admii	nisterea i	ne Traini	ng:		
Identify The Exercises That You	Have Bee	n Trained	For:					
In Basket	al erview	Tactical	Probler Employ		Qualities of Leadership			
Please list other exercises that are not listed and					•			

Describe Your Assessor Experience:					
CERTIFIED ASSESSOR CERTIFICATION STATEMENT By typing your name in the box provided below, you are certifying that the information provided within the Illinois Promotional Assessor Profile, to the best of your knowledge, is true, accurate and complete.					
Certified Assessor Typed Signature Date:					

Joint Labor Management Committee (JLMC) Statement

Based upon this Assessor Profile submitted to the JLMC, we believe this information is accurate. However, the JLMC is highly recommending that the entity seeking Assessors conduct their own review and validation process.

You can also manually email this form to jlmchire@gmail.com or fax to 217 522-8244.