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## Illinois Promotional Assessor Profile

Appendix #1

## Illinois Promotional Assessor Registration/Profile

**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:	
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Contact Information (	Please note that	this p	age wi	ll be posted on	the OSF	/I Websit	e)
Last Name	First Name			If Applicable: N	lame of De	epartment/	Business
If Applicable: Department/Busine	ss Mailing Address	5	City		State	Zip	County
Email address:		Conta	act Phor	ne Number (not n	nandatory	to provide	on the page)

Fire or El	MS I	Employmen	t Sta	tus (Please	e che	ck one)			
Full Time		Combination		Volunteer		Part Time	Retired	Consultant	

Fi	re or EMS Position (Rank)		
	Name of Organization	Position Title	Dates of Position
1			
2			
3			
4			

De	escribe Your	Duties and Responsibilities of your Positions
	Position	Overview of Duties and Responsibilities
1		
2		
3		
4		

Breadth of Supervisor and/or Officer Experience	Current	Past
Number of full-time employees I supervise or have lead directly:		
Number of employees I supervise or have lead indirectly:		

Education (only accredited instituti	ons and a copy of your degree must	t be attached)
Degree	College/University	Major

Fire/EMS Service Certifications (A copy	of your certificates must be attached)	
Title	School or Organization	Date

Special Skills:		

Describe Your Assessor Training and Organization Who Administered the Training:	

Identify	The l	Exercise	s That <b>\</b>	'ou Have I	Been	Trained	For:			
In Basket		Leaderles Group	ss 🗌	Oral Interview		Tactical		Problem Employee	Qualities of Leadership	
Please list of that are not describe th	t listed									

<b>Describe Your Assessor Experience</b>
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## **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.