

Inspect and Test

Application Form

Trainee Accreditation

Application Process

Important Note:

Please read the Trainee Accreditation FACT SHEET available on: <http://www.fpa.com.au/fpas/fact-sheets-application-forms> before completing this application form.

What you need to do to complete this form:

- | | |
|---|---|
| A. Provide us with your details. | 2 |
| B. Select the 'inspect and test' category(s) you are applying for. | 3 |
| C. Provide details of the formal learning you are enrolled in or plan to enrol in. | 4 |
| D. Attach a passport size photograph of yourself. (Head to shoulders against a white background). | 4 |
| E. Confirm your insurance requirement. | 5 |
| F. Read the Code of Professional Conduct. | 5 |
| G. Sign the applicant declaration and have it witnessed. | 6 |
| H. Ensure the supervisor declaration is completed and signed. | 7 |
| I. Provide payment details for the application fee. | 8 |





A. Application Details

Personal and Employer details are mandatory, so all fields need to be completed.
 Personal details are required as you may change employer in the future.

Personal Details:

Surname:		Given names:	
Title:		Date of birth:	
Residential street address:			
Suburb:		State:	Postcode:
Postal Address:	Write 'as above' if same a residential address		
Suburb:		State:	Postcode:
Phone number:		Mobile:	
Email:			

Employment Details:

Employer's Company Name:			
Street:			
Suburb:		State:	Postcode:
Work phone number:		Work mobile:	
Work email:			



B. 'Inspect and Test' Categories

Trainee Accreditation is awarded by FPA Australia to individuals who are currently working in the fire protection industry and do not meet the minimum experience requirements for FPAS. Individuals who gain Trainee accreditation are required to work under the supervision of an individual that holds Qualified or Transitional FPAS Accreditation for the category(s) being applied for. You will then need to transition to Qualified Accreditation within twenty-four (24) months.

Trainee Accreditation is **only valid** while the individual is working under direct and/or indirect supervision, as outlined in the 'Supervision Requirements' section below. If your supervisor changes or leaves, it is your responsibility to ensure that you continue to work under the supervision of an appropriately FPAS-accredited fire protection technician.

Supervision Requirements

a/ **Direct Supervision** is required for the first three (3) months, and then indirect supervision for the remainder of the Trainee accreditation period where the Trainee has not completed the required FPAS units of competency for the Inspect and Test Categories being applied for.

b/ **Indirect Supervision** is required for the entire two-year Trainee accreditation period where the Trainee has completed the required FPAS units of competency for the Inspect and Test Categories being applied for.

Please complete the table below to indicate the category(s) and level you wish to apply for, and provide the name and accreditation number of your principal supervisor(s) for each category you are applying for.

Note: Fill out this section even if your supervisor is in the process of applying for accreditation. You must select all categories that reflect your actual 'inspect & test' work activities.

Please circle R or C	Category	Principal Supervisor	Accreditation Number
R or C	1. Fire sprinkler systems		
R or C	2. Fire pumpsets		
R or C	3. Fire hydrant systems		
R or C	4. Fire detection and alarm systems		
C	5. Gaseous fire suppression systems		
C	6. Pre-engineered fire suppression systems (non-gaseous)		
C	7. Portable fire equipment and fire hose reels		
C	8. Fire and smoke doors		
C	9. Fire seals and collars		
C	10. Exit and emergency lighting.		

R Routine Level: Routine Level (R) activities are conducted up to and including six (6) monthly, as described in AS1851-2012.

C Complex Level: Complex Level (C) activities includes those activities for Routine Level (R), and other activities conducted annually as described in AS1851-2012.

Did you select Category 5 – Gaseous Fire Suppression Systems? Yes / No (Please circle one)

If 'Yes', please do one of the following:

- Supply a copy of your Extinguishing Agent Handling Licence (EAHL); OR
- Initial here to declare that you do not work with any ozone-depleting gases. _____



By applying for accreditation, you are confirming that you will:

- conduct Inspect and Test activities in your applicable category in accordance with the relevant standard(s).
- conduct only those Inspect & Test activities for which you hold accreditation.
-

C. Formal Learning

Are you currently enrolled in any of the required units of competency for FPAS accreditation in your selected categories:

Yes or NO

Name of Institute / RTO:

Date of Commencement:

Optional

Comments

If you have already completed the units of competency required for FPAS accreditation in your selected categories, please attach a certified copy of your Statement/s of Attainment.

Please refer to the table of required units on pages 5 – 6 of the Qualified Accreditation Fact Sheet to determine if you have completed all relevant units: <http://www.fpa.com.au/fpas/fact-sheets-application-forms.aspx>.

Please see the **Check List** page of this application for information on how to certify documents.

Note: If your Statement of Attainment was issued by FPA Australia, you are not required to have it certified.

Alternatively, please tick here to authorise Accreditation & Licensing staff to access your training history held by the Registered Training Organisation (RTO) within FPA Australia.



D. Colour Passport Photograph

Please attach a current colour passport-size photograph (minimum size 4 cm high x 3.5 cm wide) printed on photographic paper in the box provided. Alternatively you can supply a digital image in .jpg or .tif format to fpas@fpaa.com.au as per the requirements of passport photographs e.g. the photograph should be no more than six months old; be a close up of your head and top of shoulders; and be taken with a white or pale background.

Photo

Attach using tape or glue.
Do not staple through
photo.

This is a true photograph / digital image of the applicant as witnessed by:

Full Name of Witness: (Print) _____

Signature: _____

Date: ____ / ____ / _____

Contact no: _____

E. Check Your Insurance Cover

Insurance cover provides benefits to accredited individuals, business entities and the broader community by mitigating the risks associated with an unforeseen event.

As such, you as an accredited individual in the Inspect and Test class should be appropriately covered by insurance for the fire protection services you undertake.

This means that you, as an employee of or contractor to a company, or operating as a sole trader, must hold Public & Products Liability Insurance coverage for a minimum of \$10 million.

Your policy must cover all of the work activities you undertake and it must remain current.

For businesses that do not hold FPA Australia membership, please provide a Certificate of Currency as proof of Public & Products Liability Insurance coverage for a minimum of \$10 million.

F. Read the Code of Professional Conduct

The Fire Protection Association Australia Code of Professional Conduct (the Code) prescribes the principles, standards of behaviour and service delivery requirements expected of accredited individuals under FPAS.

You as an accredited individual must sign the Code of Professional Conduct declaration, stating that you will abide by the requirements of the Code and accept any decision if it is determined you have breached the Code.

Breaching the code may result in cancellation of an individual's accreditation.

The Code is located at www.fpa.com.au/fpas/copc.



FPA Australia Fire Protection Accreditation Scheme (FPAS)

G. Applicant Declaration

Please tick: ✓

- I declare that the information contained in this application is true and correct in every particular.
- I acknowledge that FPA Australia may contact any person or other entity to verify information provided in this application.
- I agree to comply with the specified conditions of FPAS, in particular to complete the required Units of competency in order to transition from Trainee Accreditation to Qualified Accreditation within twenty-four (24) months.
- I acknowledge that, from time to time, it may be deemed necessary by the Scheme to include additional unit(s) to 'inspect and test' categories.
- I commit to conduct Inspect and Test activities in accordance with the relevant Standard(s).
- I commit to conduct only those Inspect & Test activities for which I hold accreditation.
- I confirm that I and/or my employer hold and maintain the minimum insurance requirement of \$10 million for Public & Products Liability Insurance and that the level of insurance cover held is adequate to cover the services and activities I undertake in the fire protection industry.
- Note:** For businesses that do not hold FPA Australia Membership, a Certificate of Currency **MUST** be provided for the above insurance requirement with your application.
- I have read and agree to the FPA Australia Code of Professional Conduct for Accredited Individuals. The Code of Professional Conduct prescribes the principles, standards of behaviour, and service delivery requirements expected of accredited individuals under FPAS. (www.fpa.com.au/fpas/copc).
- I understand that as a requirement of my accreditation, I am required to ensure that my FPAS Accreditation Number is noted on any Logbooks where I have undertaken Inspect and Test activities on any given site.

Print Name of Applicant _____

Signature of Applicant: _____

Date: ____ / ____ / ____

Witness Details:

Signature of Witness: _____

Date: ____ / ____ / ____

Name: (Print) _____

Street: _____

Suburb: _____

State: _____

Postcode: _____

Contact no: _____

Disclaimer

Accreditation under the Fire Protection Accreditation Scheme is not a substitute for any requirements for licensing, registration or accreditation established by relevant applicable legislation (state, territory and/or federal) unless otherwise confirmed by relevant regulation.



H. Supervisor Declaration

Please complete either Scenario 1 or 2 only:

1. Trainee employed directly by the company

On behalf of the company and as the principal supervisor:

Please tick: ✓

- I certify that the information contained in this application is true and correct in every particular to the best of my knowledge.
- I declare that the applicant will be given experience in the 'inspect and test' category(s) applied for whilst working under supervision by a Qualified or Transitional accredited fire protection technician(s).

Print Name of Supervisor: _____

Signature of Supervisor: _____ Date: ____ / ____ / ____

2. Trainee is a Sole Trader

An applicant that is a Sole Trader can obtain Trainee accreditation only if he/she has completed the relevant units of competency for the selected Inspect & Test work categories.

The person/s selected to indirectly supervise the applicant must hold Qualified or Transitional FPAS Accreditation in the same Inspect & Test work categories.

Please tick: ✓

- I certify that the information contained in this application is true and correct in every particular to the best of my knowledge.

Print Name of Supervisor: _____

Signature of Supervisor: _____ Date: ____ / ____ / ____

FPA Australia Fire Protection Accreditation Scheme (FPAS)



I. Payment Details

Accreditation fee: **\$220 (incl. GST)**. This payment includes fees for two (2) years **OR**

Fee waiver as holder of current eligible licence (copy supplied).

You may be eligible for an accreditation fee waiver if you are a holder of a current:

- Queensland Building Construction Commission (QBCC): Fire Protection Occupational Licence.

Method of payment: Cheque payable to **Fire Protection Association Australia**. ABN 30 005 366 576

EFT payment: FPA Australia BSB: 033 083 Account No: 33-2932

Note: Please advise reference number, name, payment time, date and amount to: fpas@fpaa.com.au.

Credit card: VISA MasterCard AMEX

Card Number: _____

Name on Card: _____

Expiry Date: ____ / ____

Signature: _____ Amount: _____

A tax invoice will be mailed to you with your FPAS Accreditation kit.

Enquiries

If you have any questions or enquiries please call: 03 8892 3131. For additional FPAS resource materials: www.fpaa.com.au/fpas

Return this Application Form including certified documents to:

Accreditation Manager
Fire Protection Association Australia
PO Box 1049
Box Hill
Victoria 3128

OR

Scan your completed Application form and email it together with your photo (.jpg or .tif) to fpas@fpaa.com.au.

Note: In order to keep your file size to a minimum, you should scan your application form in black and white.

Privacy Policy

FPA Australia respects the privacy and personal information of its members. Personal and business information is collected by the Association for the primary purpose of providing services to members and maintaining the membership and accreditation registers. FPA Australia aims to manage and protect personal information in accordance with national privacy guidelines recommended pursuant to the Privacy Act 1988 (Cth) or the most current version of this act, and the Australian Privacy Principles. The Association's Privacy Statement can be viewed online at www.fpaa.com.au/about/privacy-policy.



Check List

To ensure that your application can be processed, please use this Check List to confirm you have completed all the necessary actions.

If we do not receive all the items listed below, we will not be able to process your application.

- A. Applicant Details** Yes
Have you fully completed the Applicant Details section?
- B. 'Inspect and Test' Categories** Yes
Have you checked that you have provided the name of your principal Supervisor for each category you have applied for.
- C. Formal Learning** Yes
Have you provided details of your formal learning?
- D. Photograph** Yes
Have you attached a current passport-size colour photograph?
Has your photograph been witnessed?
- E. Insurance Compliance** Yes
Have you confirmed that you hold appropriate current insurance?
- F. Code of Professional Conduct** Yes
Have you read the Code of Professional Conduct?
- G. Declaration, Signature & Witness Details** Yes
Has your signature in the Applicant Declaration section been witnessed?
Have you ticked all declaration items?
- H. Supervisor's Signature** Yes
Has your principal Supervisor signed the declaration that the information in the application form is correct?
- I. Payment** Yes
Have you completed the payment section?
Have you attached a copy of any licence required for fee waiver?

How to certify a copy of a document?

Take your original document(s), along with the photocopies to a person who is authorised to sign certified copies. Ask them to write the following statement on a blank area of the photocopy. For example:

"This is a true copy of the original document sighted by me."

Ask the authorised person to sign and date the copy, then legibly write or stamp his or her name, title, address and a date when signing.

Note: Do not send original documents.

Examples of people authorised to sign and certify copies include:

A registered medical practitioner, dentist, veterinary practitioner, pharmacist, principal in the [Government] teaching service, the [branch] manager of a bank, member of the Police force, a member or a former member of either House of the Parliament of the State or Commonwealth, Justice of the Peace or a Bail Justice, barrister and solicitor of the Supreme Court, councillor of a municipality, senior officer of a council.

