

SOUTHERN AFRICAN EMERGENCY SERVICES INSTITUTE NPC

Registration No. 2014/162285/08

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Addresses:

No. 295 Jorissen Street
Monument
KRUGERSDORP, 1739

PO Box 613, KRUGERSDORP, 1740

APPLICATION:

RECOGNITION OF PRIOR LEARNING

ACC 107

Wilderness Rescue 1 - NFPA 1006, 2013

First Name/s: _____

Surname: _____

ID Number: _____ Age: _____

Employer: _____

Postal Address: _____

(Where result and certificate/s should be sent)

Postal Code: _____

Tel No: _____ Fax No: _____

Cell No: _____ Membership No. _____

***NB!* Membership of the Institute is a prerequisite for application of RPL**

PURPOSE:

The purpose of this procedure is to assess your academical qualification **in combination with your experience** to determine if accreditation for the Wilderness Rescue 1 qualification is appropriate. Any person with a Wilderness Rescue Qualification or equivalent (Portfolio of evidence) and **3 years Fire or Rescue Department service** and an acceptable **CV of appropriate** experience can apply.

PROCEDURE:

- Submit a certified copy of training attended which satisfy the requirements of NFPA 1006, chapter 16.
- Submit a certified copy of the course content and curriculum of course attended
- The decision of the Quality Assurance Working Group will be final.
- After evaluation of the application, the applicant will be informed in writing of the outcome of the assessment and of what will be required for full accreditation, if applicable.
- If an application is made with any other qualification, not presented by SAESI, the curriculum of the qualification and **Portfolio of Evidence** of the student should be included.
- Application with regards to experience should be completed on annexure A & B. (No other CV will be accepted)
- Proof of Payment MUST ACCOMPANY application

Experience/ history

Date 1 st appointed in the Fire Dept.	
Highest Fire Qualification (Now)	
Position held.(Now)	
Designation (Now)	(Ops/Training/Admin Etc.)
Duration	From: to:

The application and proof should be marked "**Quality Assurance Working Group**" and submitted to:

SAESI
P.O. Box 613
KRUGERSDORP
1740
Fax: 011 660 1887
Fax2Mail: 086 544 0008
Email: info@saesi.com

An administrative fee of R164.00 for members and R322.00 for non-members for **each** RPL application will be payable to SAESI before evaluation of the application. Proof of the payment should accompany the application.

The administration fee DOES NOT INCLUDE Certification/Seal fee.

Direct deposits can be made to:

The Southern African Emergency Services Institute (SAESI)

Bank: ABSA
Account number: 310 810 045
Branch – Krugersdorp 632005

or the SAESI Branch Account to which you belong

Note: Please use additional paper if the space provided is not adequate.

1. General Requirements.

- Discuss your involvement in the directing of a team in the operation of a simple rope mechanical advantage system in a high-angle raising operation, given rescue personnel, an established rope rescue system incorporating a simple rope mechanical advantage system, a specified minimum travel distance for the load, a load to be moved, and an anchor system, so that the movement is controlled, a reset is accomplished, the load can be held in place when needed, operating methods do not stress the system to the point of failure, commands are used to direct the operation, and potential problems are identified, communicated, and managed , as per NFPA 1006, 6.1.1

- Discuss your involvement in the directing of a lowering operation in a high-angle environment, given rescue personnel, an established lowering system, a specified minimum travel distance for the load, and a load to be moved, so that the movement is controlled, the load can be held in place when needed, operating methods do not stress the system to the point of failure, rope commands are used to direct the operation, and potential problems are identified, communicated, and managed, as per NFPA 1006, 6.1.2

- Discuss your involvement in the interviewing witness(es) at a rescue incident, given witness recording forms, so that available information as to the potential location, habits, mental and physical condition, clothing, and appearance of the victim can be determined; subject profile can be established; victim's last known location is identified; and search urgency and area(s) can be prioritized, as per NFPA 1006, 16.1.1

- Discuss your involvement in the collection, interpretation, and documentation of evidence to determine victim's potential location at a rescue incident, given various pieces of evidence and collection and documentation equipment and wilderness tool kit, so that the scene (area is thoroughly searched and evidence is protected, documented, cataloged, and collected, as per NFPA 1006, 16.1.2

- Discuss your involvement in the preparation to work in a wilderness environment for a 24-hour period of time at a rescue incident, given survival equipment, so that the rescuer can be self-sustaining in the wilderness environment, as per NFPA 1006, 16.1.3

- Discuss your involvement in the navigation in the wilderness to a specified location, given navigation equipment, topographical maps for the area to be navigated, and communication equipment, so that the specified location is identified and reached, search patterns are conducted, teams are guided to the desired location, and all clues relative to the location of the search victim are identified and communicated back to the command post, as per NFPA 1006, 16.1.4

- Discuss your involvement in the construction of an emergency shelter in a wilderness environment during a rescue incident, given the natural resources of the area, so that the rescuer is protected from the elements, as per NFPA 1006, 16.1.5

- Discuss your involvement in the collection and purifying of water, given a natural source of water in the wilderness environment, so that the rescuer can have potable water to consume, as per NFPA 1006, 16.1.6

- Discuss your involvement in the identifying of potential natural food source(s) in a wilderness environment, given the natural food resources of the area, so that the rescuer is able to survive in an emergency situation for an extended period of time, as per NFPA 1006, 16.1.7

- Discuss your involvement in the establishment for the need for specialized resources in wilderness search and rescue operations, such as aircraft, watercraft, or specialized vehicle, given operational protocols and specialized vehicle resources, so that resources are allocated and utilized during the operation to locate and/or remove the subject, as per NFPA 1006, 16.1.8

- Discuss your involvement in the locating a victim in a wilderness rescue incident environment, given a lost person profile, established search area, navigation equipment, topographical maps, and communication equipment, so that the victim's location can be determined, as per NFPA 1006, 16.1.9

- Discuss your involvement in the managing of a victim in a wilderness rescue incident, given a basic life support kit, and wilderness tool kit, so that the basic medical care of the victim is managed during transport, and the potential for further injury is minimized, as per NFPA 1006, 16.1.10

- Discuss your involvement in the movement of a victim in a wilderness rescue incident, given victim transport equipment, litters, other specialized equipment, and victim removal systems specific to the rescue environment, so that the victim is moved without undue further injuries, risks to rescuers are minimized, the integrity of the victim's packaging within the transfer device is established and maintained, and the victim is removed from the hazard, as per NFPA 1006, 16.1.11

Declaration of Applicant & Management Representative/s

I, _____ (initials and surname of applicant) hereby confirm that the information is true and that I will accept the decision of the Quality Assurance Working Group with regards to my application.

Sign: _____ Date _____



I, _____ in my capacity as the Head of Training for _____ hereby confirm that the above mentioned information, provided above is correct to the best of my knowledge.

Sign: _____ Date _____

(Head of Training)



I, _____ in my capacity as the Head of Organization / Department / Section _____ hereby confirm that the above mentioned information, provided above is correct to the best of my knowledge.

Sign: _____

(Head of Organization / Department / Section)

