

STATUTORY DECLARATION

Vertical rescue skills

I, _____
of _____

in the State / Territory of _____, do solemnly and sincerely declare

[read and initial each paragraph]

___ that I am applying for full Recognition of Prior Learning (RPL) in respect of my vertical rope rescue skills in the context of emergency response to accidents involving falls from height.

___ that I make this application on the basis of my proven capability in selecting and initiating an effective rescue procedure in a vertical or high angle environment.

___ that I acknowledge and accept that before I can effectively act as a member of a vertical rescue team, I must possess adequate personal roping skills including: abseiling, knot tying, installing solid and reliable anchors, hauling systems etc. I declare that I have underpinning knowledge and skills that enable me to act as an effective member of a rescue team.

___ that I have proven capability in:

1. assessing and prioritising an emergency situation
2. gaining access to a patient using abseiling techniques
3. installing and using a lowering system
4. installing and using a mechanical advantage (hauling) system
5. packaging a patient into a stretcher
6. preparing a stretcher for rope evacuation
7. accompanying a stretcher as a medic rider (outriding and inriding)
8. Redirecting the trajectory of ropes using a diversion systems
9. working effectively as a member of an emergency rope rescue team

___ that it is my responsibility to remain up-to-date with current best practice in vertical rope rescue techniques so that I can effectively respond to emergency situations in my capacity as a member of a vertical rescue team.

___ I further acknowledge that this document may be relied upon in any proceedings instituted in any Court by me or my heirs, executors and assigns or any other natural person.

I acknowledge that this declaration is true and correct and I make it in the belief that a person making a false declaration is liable to the penalties of perjury.

Signature of person making declaration	
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Declared at _____ in the State/Territory of _____

on the _____ Day of _____ 19 _____

Before me,

Signature	
Print Name	
Address	
Status*	

* Justice of the Peace

* Person authorised under relevant State/Territory legislation to witness the signing of a Statutory Declaration