

**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:** 1/5/10

Contact Information <i>Please Type or Print</i>					
Last Name Riddle		First Name David		If Applicable: Name of Department/Business Channahon Fire Prot. Dist.	
Home Mailing Address 26847 Overland			City Channahon	State IL	Zip 60410
If Applicable: Business Mailing Address 24929 Center			City Channahon	State IL	Zip 60410
Office Phone 815.467.6767		Fax Phone 815.467.5081		Cell Phone	
Email Address: chief@channahonfire.com					

Fire or EMS Employment Status <i>Please check one</i>											
Full Time	<input checked="" type="checkbox"/>	Combination	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>	Part-Time	<input type="checkbox"/>	Retired	<input type="checkbox"/>	Consultant	<input type="checkbox"/>

Fire or EMS Position (Rank).			
	Name of Organization	Position Title	Dates Position
1	Channahon Fire Prot Dist	Chief	4/99- Present
2	Harvey FD	Chief	2/96-4/99
3	Harvey FD	D/C	1989-2/96
4	" "	CAPT	1/84-1989

Describe Your Duties and Responsibilities of your Positions		
	Position	Duties and Responsibilities
1	Chief	Fire Prot. Dist. Chief Adm.
2	chief	Fire Dept. Fire Chief
3	D/c	Fire Dept. Deputy Chief

Breadth of Supervisor and/or Officer Experience	Current	Past
Number of full-time employees I supervise or have lead directly:	22	60+
Number of employees I supervise or have lead indirectly:	30	20

Education (Only accredited institutions and a copy of your degree must be attached)		
Degree	College/University	Major
AAS	South Sub. College	Fire Science
	Southern Ill Univ.	Fire Serv. Mgmt.

Fire/EMS Service Certifications (A copy of your certificates must be attached)		
Title	School or Organization	Date
Exec. Fire officer	Nat'l. Fire Academy	2004

**Special Skills.**

**Describe Your Assessor Training And Organization Who Administered the Training.**

Administered by IFCA-  
 Training: 2/8/02  
 11/12/02  
 10/28/09

Identify The Exercises That You Have Been Trained For.											
In-Basket	<input checked="" type="checkbox"/>	Leaderless Group	<input checked="" type="checkbox"/>	Oral Interview	<input checked="" type="checkbox"/>	Tactical	<input checked="" type="checkbox"/>	Problem Employee	<input checked="" type="checkbox"/>	Qualities of Leadership	<input type="checkbox"/>
Please list other exercises that are not listed and describe them.											

**Describe Your Assessor Experience.**

4/6/09 - Lisle - Captain  
 4/9-10/09 - Lisle - Lt.  
 3/6/09 - Byron - Lt.  
 9/25/08 - Oak Forest - Lt.  
 7/17/08 - Lisle - B/c  
 5/13/08 - Carol Stream - B/c  
 5/21/08 - Quincy - A/c

This is to certify that the information I provided is true and correct. Further, I have read and agree to abide by the Code of Ethics.

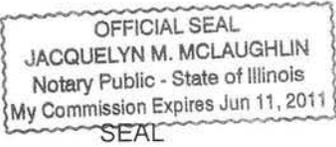
State of: IL  
County of: Will

Subscribed and sworn to (or affirm) before me this 5<sup>TH</sup> day  
of January, 2010, by:

Print Name of Signer: David S. Riddle

Signature of Signer: David S. Riddle

Signature of Notary Public: Jacquelyn M. McLaughlin



**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.