

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: 16 NOV 09

Contact Information *Please Type or Print*

Last Name Dubowski	First Name Edward	If Applicable: Name of Department/Business			
Home Mailing Address 910 S. Peale Avenue		City Park Ridge	State IL	Zip 60068	County Cook
If Applicable: Business Mailing Address		City	State	Zip	County
Office Phone	Fax Phone	Cell Phone (847) 561-8688			
Email Address: edoffsite@yahoo.com					

Fire or EMS Employment Status. *Please check one*

Full Time	<input type="checkbox"/>	Combination	<input type="checkbox"/>	Volunteer	<input type="checkbox"/>	Part-Time	<input type="checkbox"/>	Retired	<input checked="" type="checkbox"/>	Consultant	<input type="checkbox"/>
-----------	--------------------------	-------------	--------------------------	-----------	--------------------------	-----------	--------------------------	---------	-------------------------------------	------------	--------------------------

Fire or EMS Position (Rank).

	Name of Organization	Position Title	Dates Position
1	Park Ridge Fire Department	Chief, ret.	06/78-09/08 (Chief 1998-2008)
2			
3			
4			

Describe Your Duties and Responsibilities of your Positions

	Position	Duties and Responsibilities
1	Chief	Responsible for the administration and operation of Department
2	Deputy Chief	Assisted in the administration and operation of the Department
3	Lieutenant/paramedic	Company officer responsible for the delivery of fire suppression, EMS, and specialized emergency response services

Breadth of Supervisor and/or Officer Experience	Current	Past
Number of full-time employees I supervise or have lead directly:	0	5
Number of employees I supervise or have lead indirectly:	0	48

Education (Only accredited institutions and a copy of your degree must be attached)		
Degree	College/University	Major
Master of Public Administration	Northern Illinois University	Public Administration
Bachelor of Arts	Columbia College	Photography

Fire/EMS Service Certifications (A copy of your certificates must be attached)		
Title	School or Organization	Date
Fire Officer III	Illinois Office of the State Fire Marshal	1999
Illinois Professional Emergency Manager	Illinois Emergency Management Agency	2008
Chief Fire Officer	Commission on Professional Credentialing	2002
Chief Medical Officer	Commission on Professional Credentialing	2008

Special Skills.

Numerous other fire service, EMS and emergency planning certifications, licenses and training.

Describe Your Assessor Training And Organization Who Administered the Training.

Illinois Fire Chiefs Association Promotional Evaluation and Assessment Service
 Chief Tom Allenspach, ret.
 March 22, 1999

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 checked="" type="checkbox"/>
Please list other exercises that are not listed and describe them.											

Describe Your Assessor Experience.

I have conducted numerous assessment centers for different organizations beginning in 1999. The vast majority of my experience has been with the IFCA.

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: Illinois
County of: Cook

Subscribed and sworn to (or affirm) before me this 16th day
of November, 2009, by:

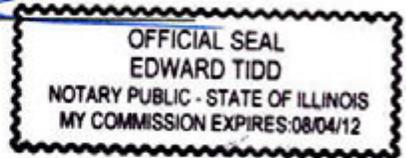
Print Name of Signer: Edward V. Dubowski

Signature of Signer: Edward V. Dubowski

Digitally signed by Edward V. Dubowski
DN: cn=Edward V. Dubowski, o=me,
email=edwardv@ifca.com, c=US
Date: 2009.11.16 14:27:47 -0500

Signature of Notary Public:

SEAL



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.