



**Certification Examination
Evaluator Code of Conduct**
(REV. 05/20)

Code of Conduct

As a Registered Lead Evaluator and/or Skills Evaluator for State Fire Training, I realize that consistent, quality testing and evaluation is a primary obligation to candidates and the departments/agencies they serve.

It is my job to administer examinations that will provide the candidates with a successful and rewarding experience, and I will work to ensure the success of each candidate. Furthermore, I agree to recuse myself from any assignment as an evaluator where I know that I will be unable to objectively evaluate one or more of the candidates.

I will refrain from making remarks or telling stories/jokes that may be considered offensive to others. I will be professional regarding socializing with candidates, and I will limit candidate contact outside of the examination process as not to put the evaluator-candidate relationship at risk. It is my responsibility to use good judgment in selecting clothing that projects a professional image, and that is appropriate for both evolutions and classroom activities.

I agree that I will never evaluate testing for a level of certification for which I am not personally certified or for which I do not possess a mastery of the subject.

If I have comments or complaints about other instructors, evaluators, candidates, and/or staff members, I will express them to State Fire Training, and not to other individuals or groups.

I expect safety rules to be observed by everyone—evaluators, instructors, visitors, as well as candidates. If for any reason I am unable to serve as Lead Evaluator for the exam I have been assigned, I will contact State Fire Training as soon as possible, but in any case, no less than 48 hours prior to the exam date.

As a Registered Lead Evaluator/Skills Evaluator, I agree to abide by all the policies and procedures stipulated by State Fire Training including but not limited to: conducting training, delivering certification exams, maintaining examination security, maintaining records and submitting reports. I further agree not to reproduce or release any certification examination materials.

I understand that to disregard any of State Fire Training's policies and procedures would violate my agreement with State Fire Training and thereby cause me to be subject to disciplinary action.

Evaluator Information

Full Name: _____

SFT ID Number: _____

Email and Phone: _____

Signature: _____

Date Signed: _____