**UFBA Membership Advisory Panel Consultation Review**

This form can be used to outline matters for consideration by the Membership Advisory Panel (MAP) and/or other UFBA membership group or committee. The completed form should be sent to Memberservices@ufba.org.nz

**PART 1. Completed by the person/s (Review owner) who wants the MAP to consider a matter of importance to the wider membership– this lays out the matter to be raised and recommendations of the Review owner:**

|  |  |
| --- | --- |
| MATTER FOR REVIEW |  |
| **Review owner** |  | **Review liaison** |  |
| **Purpose of review** |
|  |
| **Detail and discussion** |
|  |
| Review owner’s recommendation |
|  |
| **Timeframe for consultation (if required)** |
|  |
| **Consultation questions (if required)** |
|  |
| **Impacted/affected** |
| Individual[ ]  | Brigade[ ]  | Specific demographic[ ]  |
| Individuals (few/many)[ ]  | Region[ ]  | Specific rank/role[ ]  |
| Other[ ]  Specify |
| **Size or scale of issue** (‘National’ to prompt consultation outcome) |
| Individual[ ]  | Local[ ]  | Regional[ ]  | National[ ]  |
| **Sensitivity of matter** |
| High impact[ ]  | Medium impact[ ]  | Low impact[ ]  |
| **Level of information needed** |
| Broad opinion[ ]  | Specialist advice required[ ]  |
| **Formality** |
| Formal[ ]  | Informal[ ]  |
| **Communication channels** |
| **Face to face** | **Digital** | **Print** |
| On site presentation [ ]  | Poll/survey [ ]  | Newsletter [ ]  |
| Telephone call [ ]  | Article/blog post [ ]  | Letter [ ]  |
| Special meeting [ ]  | Social media post [ ]  |  |
| Muster [ ]  | Email [ ]  |  |
| Other (please specify) |
| **Most appropriate audience to inform outcome/consult**  |
| All Members [ ]  | Board[ ]  | Past Presidents[ ]  | LHMs [ ]  |
| Brigade Reps[ ]  | CFOs/Controllers [ ]  | Tech Panel[ ]  | Sector Partners[ ]  |
| Working Party Reps[ ]  | Provincial Assoc.s[ ]  | Other (please specify) |
| Approved for review by MAPSigned: Bill Butzbach, Chief Executive  | Date: |

**PART 2. For MAP completion** – please detail your advised actions and view of the recommendations. This may differ to that of the Review owner. Please explain your advice throughout.

|  |  |
| --- | --- |
| FOR REVIEW BY MAP |  |
| **Impacted/affected** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Size or scale of issue** (‘National’ to prompt consultation outcome) |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Sensitivity of matter** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Level of information needed** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Formality** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Communication channels** |
| **Face to face** | **Digital** | **Print** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Most appropriate audience to inform outcome/consult** |
| Agree [ ]  | Disagree [ ]  |
| Comments: |
| **Final recommendation** (please provide detail below) |
|  |
| Signed: Date:MAP Chair, Jason Prendergast |