

<b>LS COURSE NAME:</b>	Area Induction – RMA Mud Farming	<b>COURSE ID:</b>	31019499
		<b>QUAL ID (Non Area Personnel):</b>	31091733 <input type="checkbox"/>
		<b>QUAL ID (Area Personnel):</b>	31019500 <input type="checkbox"/>

EMPLOYEE TO COMPLETE												
<b>Full Name:</b>												
<b>SAP ID:</b>												
<b>Department:</b>												
<b>Contractor:</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Company:</b>									

Employee

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

ASSESSMENT SUMMARY AND CERTIFICATION	
<input type="checkbox"/>	Initial Training (Assessment and walk around required)
<input type="checkbox"/>	Recognition of current competency (if selected complete statement below & theory assessment)
<b>RCC Declaration:</b> I confirm that as part of my role I am required to conduct activities within RMA Mud Farming area and confirm that I complete this task/s _____	
<input type="checkbox"/>	Frequency of task _____ (Daily, Weekly, Monthly)
<input type="checkbox"/>	And have executed this task in the last month
NOMINATED TEAM LEADER TO COMPLETE for RCC	
Name:-	Signature:-
<input type="checkbox"/> Request for RCC confirmed	<input type="checkbox"/> Request for RCC Not Confirmed

TRAINER / ASSESSOR TO COMPLETE			
	NAME	SIGNATURE	DATE
<b>Assessment Completed By:</b>			
ASSESSMENT SUMMARY AND CERTIFICATION			Assessor Signature (Satisfactory)
Recognition of Current Competence (RCC):			
Theory Assessment:			
LEARNING & DEVELOPMENT TO COMPLETE			
<b>Administrator Signature:</b>		<b>Date:</b>	