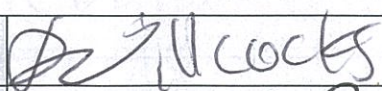



RTO Assessment Tool

Unit Code	RIIWS204E	Unit Name	Work Safely At Heights
Learner Name	todd willcocks		
RTO Trainer Name	Belinda Belinda radford		
Assessment Type	<input type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment			
Instrument Name	Result	Feedback to Learner	
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Summative Assessment			
Instrument Name	Result	Feedback to Learner	
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. Nil			
Overall Result			
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		
Learner Declaration			
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision			
Learner Signature		Date	24/2/21
Trainer / Assessor Signature		Date	24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No		



RTO Assessment Tool

Unit Code	RIIWH5204E	Unit Name	Work Safely At Heights
Learner Name	Olicer Hulbert		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment		
Instrument Name	Result	Feedback to Learner
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Summative Assessment		
Instrument Name	Result	Feedback to Learner
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. <div style="text-align: center; font-size: 1.5em; color: green;">Nil</div>		
Overall Result		
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted
Learner Declaration		
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision		
Learner Signature		Date 24-2-21
Trainer / Assessor Signature		Date 24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	



RTO Assessment Tool

Unit Code	RIIWS204E	Unit Name	Work Safely At Heights
Learner Name	Daniel Alavarja		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment		
Instrument Name	Result	Feedback to Learner
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Summative Assessment		
Instrument Name	Result	Feedback to Learner
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. <div style="text-align: center; font-size: 1.2em; color: green;">Nil</div>		
Overall Result		
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	
Learner Declaration		
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input checked="" type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision		
Learner Signature	D. Alavarja	Date
Trainer / Assessor Signature	Belinda Radford	Date
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	

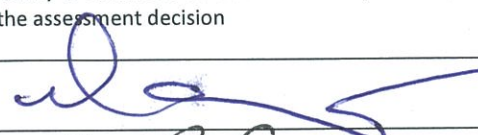

24/02/21

24/02/21

RTO Assessment Tool

Unit Code	R11WHS204E	Unit Name	Work Safely At Heights
Learner Name	Mark Warren		
RTO Trainer Name	Belenida Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment		
Instrument Name	Result	Feedback to Learner
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Summative Assessment		
Instrument Name	Result	Feedback to Learner
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. Nil		
Overall Result		
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	
Learner Declaration		
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision		
Learner Signature		Date 24/2/21
Trainer / Assessor Signature		Date 24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	



RTO Assessment Tool

Unit Code	RIIWHS204E	Unit Name	Work Safely At Heights
Learner Name	Brendan Murray		
RTO Trainer Name	Belinda Raddford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		



Results Summary

Formative Assessment			
Instrument Name	Result	Feedback to Learner	
Harness Inspection Checklist (Group Task)	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Summative Assessment			
Instrument Name	Result	Feedback to Learner	
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. Nil			
Overall Result			
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		
Learner Declaration			
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input checked="" type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision			
Learner Signature		Date	29/02/21
Trainer / Assessor Signature		Date	29/02/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No		

RTO Assessment Tool

Unit Code	RIIWS204E	Unit Name	Work Safely At Heights
Learner Name	BART Tomlinson		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

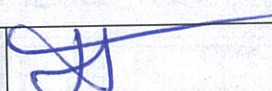

Results Summary

Formative Assessment			
Instrument Name	Result	Feedback to Learner	
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Summative Assessment			
Instrument Name	Result	Feedback to Learner	
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. <div style="text-align: center; font-size: 1.5em; color: green;">Nil</div>			
Overall Result			
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		
Learner Declaration			
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input checked="" type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input type="checkbox"/> I am aware that I may appeal the assessment decision			
Learner Signature		Date	24/2/21
Trainer / Assessor Signature		Date	24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No		

RTO Assessment Tool

Unit Code	RIIWS204E	Unit Name	Work Safely At Heights
Learner Name	Joseph Ticehurst		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment		
Instrument Name	Result	Feedback to Learner
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Summative Assessment		
Instrument Name	Result	Feedback to Learner
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. <div style="text-align: center; font-size: 1.5em; color: green;">Nil</div>		
Overall Result		
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	
Learner Declaration		
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input checked="" type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision		
Learner Signature		Date
Trainer / Assessor Signature		Date
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	

24/12/21

24/2/21



RTO Assessment Tool

Unit Code	RIIWS204E	Unit Name	Work Safely At Heights
Learner Name	MARK SPEIRS		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		



Results Summary

Formative Assessment		
Instrument Name	Result	Feedback to Learner
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Summative Assessment		
Instrument Name	Result	Feedback to Learner
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Practical Demonstration of Skills	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory	
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. Nil		
Overall Result		
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted
Learner Declaration		
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input type="checkbox"/> I have completed the training necessary to undertake this assessment <input type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input checked="" type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input checked="" type="checkbox"/> I am aware that I may appeal the assessment decision		
Learner Signature	M.A. Speirs	Date 24/2/21
Trainer / Assessor Signature	Belinda Radford	Date 24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No	

RTO Assessment Tool

Unit Code	RIIWHS204E	Unit Name	Work Safely At Heights
Learner Name	Breck Alister Johnston		
RTO Trainer Name	Belinda Radford		
Assessment Type	<input checked="" type="checkbox"/> Assessment <input type="checkbox"/> Verification of Competency (VOC) NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool		
	<input type="checkbox"/> Credit Transfer / Refresher NOTE: A copy of the learners previously achieved high risk ticket or Statement of Attainment must accompany this Assessment Tool. Learners will be given the option to not complete the written part of the assessment but must undertake the Practical training. <input type="checkbox"/> Learner has chosen not to undertake the written assessment		

Results Summary

Formative Assessment			
Instrument Name	Result	Feedback to Learner	
Harness Inspection Checklist (Group Task)	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Workbook Activities	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Summative Assessment			
Instrument Name	Result	Feedback to Learner	
Written Questions	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Practical Demonstration of Skills	<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Not Satisfactory		
Reasonable Adjustment: Please specify if any reasonable adjustments were made during assessment. Nil			
Overall Result			
Assessment <input checked="" type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted	VOC <input type="checkbox"/> Competent <input type="checkbox"/> Not Yet Competent <input type="checkbox"/> Assessment Not Attempted		
Learner Declaration			
I declare that : <input checked="" type="checkbox"/> I received the learning resources to enable me to complete this assessment <input checked="" type="checkbox"/> I have completed the training necessary to undertake this assessment <input checked="" type="checkbox"/> The completed assessments are all my own work and have initialled each page as evidence of authenticity <input checked="" type="checkbox"/> I understand how I will be informed of the assessment outcome <input type="checkbox"/> I have been offered the opportunity to comment on the assessment (Student feedback Form) <input type="checkbox"/> I am aware that I may appeal the assessment decision			
Learner Signature		Date	24/2/21
Trainer / Assessor Signature	Belinda Radford 	Date	24/2/21
Appeal Requested	<input type="checkbox"/> Yes <input type="checkbox"/> No		