## **Crew**

## **Competence 3**

(If applicable in assessment plan)

Assessor name:



Demonstrates the ability to perform in a Team and co-operate in all operational activities in a safe and reliable manner

This meets the requirements of IMCA C002/M/A09 & A14/B01 to B08

Candidate Name:		Date:	
Activity Number (1,2, or 3):			
Performance Criteria: all of these must be assessed over a minimum of 3 work activities			
Type of Evidence: Observation (O), Work Product (P), Written (W), Questioning (Q), Not Covered (N/C) or Not Applicable (N/A)			
Performance Criteria			Type of Evidence
a) Can identify areas for their own development with their Supervisor			
b) Participates in Pre-assessment and Feedback Meetings as required by the Company Competence Management Programme			
c) Understands and actively supports the assessment process, agreeing time scales for assessment with Supervisor/Assessor			
d) Communicates professionally and effectively with Colleagues and Clients			
e) Does not take unacceptable risks, and acts on and seeks guidance/advice where necessary			
f) Demonstrates a good standard of personal tidiness and hygiene in the workplace			
Demonstrates an understanding of their role in relation to subordinates and their immediate  Supervisor, promoting teamwork, trust and co-operation			
h) Assists in operational and maintenance requirements where appropriate and notifies Supervisor of equipment defects			
i) Can effectively follow instructions from their Supervisor			
j) Raises issues calmly and assertively and deals with issues promptly and appropriately			
k) Demonstrates behaviour which is aligned with company safety values, principles & culture			
Assessor - I have discussed the above performance criteria with the candidate and confirm that they have the underpinning knowledge to support their performance in these criteria			
Candidate - write a short report (250 words max) on how you achieved these criteria over the 3			
assessed work activities			
Witness name:		Date:	

Date: