Assistant Life Support Technician



Candidate Name:



Date:

The ability to perform in a team and cooperate with all operational activities in a safe and reliable manner This meets the requirements of IMCA D08/000/06

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			oe of Evidence
	development with their Supervisor		
b) Participates in pre-assessment and feedback meetings as required within the competence management programme		ement	
c) Agrees timescales for assessment with Supervisor/Assessors			
d) Participates in team briefs, risk assessments and 'toolbox' talks when required			
e) Communicates professionally and effectively with colleaguesf) Does not take unacceptable risks. Acts on and seeks guidance/advice where necessary			
f) Does not take unacceptable risks. Acts on and seeks guidance/advice where necessary g) Demonstrates a good standard of personal tidiness and hygiene in the workplace			
	enance requirements where appropriate and notifies Supervisor	of	
i) Effectively follows instructions fr	rom Supervisor		
Witness name: (If applicable in assessment plan)	Da	nte:	
Assessor name:	Da	ate:	
		@ N/	TCC I+d 27/2/2010

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