Client Representative (Diving)





The ability to oversee the efficient use of systems

This meets the requirements of IMCA C/CO2/000/07 & CO6 or CO7/000/01 & O	This meets the rea	quirements o	f IMCA C/	C02/000/07 &	C06 or C0	7/000/01 & 02
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Candidate Name:		Date:	
Activity Number (1,2, or 3):			
	st be assessed over a minimum of 3 work activities		
Type of Evidence: Observation (O), W	ork Product (P), Written (W), Questioning (Q), Not Covered (N/C) or Not	Applicable (N/A)
	Performance Criteria		Type of Evidence
2) I	petence at a senior offshore position. Supplementary evidence: in d/or personal development logbook	clude any	
	oversee all systems are correctly prepared, tested, functional, calil	brated	
Demonstrates the ability to o	oversee staff and systems are working in compliance with contract dures and company QHSE polices/procedures to meet the scope of		
Demonstrates the capability	to verify that the work meets the project specification and that sa	afety, the	
Witness name: If applicable in assessment plan)		Date:	
Assessor name:		Date:	

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