## **Offshore Administrator**





The ability to adhere to and co-ordinate workplace health and safety procedures

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
	tion and vessel/installation safety tour		
	mply with applicable company and site specific safety managemer		
Undertakes risk assessment including task risk assessments and can identify hazards and develop			
d) Is aware of, and implements, company document control procedures			
Ensures the appropriate distribution of up to date and accurate quality, safety and management			
e) information			
	ety reporting, including incident (UER) and HAZOBs reporting proce	edures	
g) Maintains and updates safet			
•	agement system (BMS) onboard the vessel/worksite	-intelne	
appropriate records	personnel into vessel and company safe operating systems and m	iaintains	
j) Can respond to emergency s	ituations in line with company/worksite procedures		
Witness name: (If applicable in assessment plan)		Date:	
Assessor name:		Date:	