## Master

## **Competence 11**



## **Command & control the vessel during Semi-submersibles**

This meets the requirements of IMCA M/A01/B05 to B08			
Candidate Name:		Date:	
Activity Number (1,2, or 3):			
	ist 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) Carry out stability calculation			
b) Maintain & control watertigl			
c) Operate the ballast control p			
1 (1) 1	he above performance criteria with the candidate and confirm th vledge to support their performance in these criteria	at tney	
e) Candidate - write a short repart assessed work activities	port (250 words max) on how you achieved these criteria over the	3	
assessed work activities			
Witness name:		Date:	
(If applicable in assessment plan)		Date.	
Assessor name:		D-4	

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Date: