AUV Supervisor





| Demonstrates the ability to manage administrative requirements in the workplace | | | |
|---|---|---------------------------|------------------|
| Candidate Name: | | Date: | |
| Activity Number (1,2, or 3): | | <u> </u> | |
| Performance Criteria: all of these mu | 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 | I (N/C) or Not Applicable | e (N/A) |
| | Performance Criteria | | Type of Evidence |
| • | onal and safety documentation is kept updated | | |
| b) Allocates responsibility for n Offshore Team | naintaining documentation, where appropriate, to oth | her members of the | |
| c\ | ual arrangements for operational issues including dov and maintenance requirements | wntime, waiting on | |
| d) Correctly interprets contract of offshore operation | ual arrangements for the calibration of equipment as | required during the | |
| e) Correctly interprets worksco | pes and end of trip reporting systems | | |
| f) Ensures all reports are comprequirements | leted in a timely manner in accordance with Compan | y and Client | |
| | | | |
| Witness name: (If applicable in assessment plan) | | Date: | |
| Assessor name: | | Date: | |