## **Senior Pilot Technician (Submersible Engineer)**



## **Competence 12**

## Demonstrates the ability to oversee all routine administrative requirements during sub-sea operations and maintenance activities

This meets the requirements of IMCA R/RO2/000/06/06

|                               | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | r |
|-------------------------------|---------------------------------------|---------------------------------------|---|
| Candidate Name:               |                                       | Date:                                 |   |
| A attivity Number (1.2 or 2). |                                       |                                       |   |

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 |
|----------------------|--|------------------|
| a)                   | Can locate and ensures all operational and maintenance documentation is made available to colleagues |                  |
| b)                   | Produces clear, comprehensive written reports for onshore management and clients to company          |                  |
| c)                   | Ensures the correct completion of logs produced by colleagues where appropriate                      |                  |
| d)                   | Can operate, maintain and supervise the use of company computer based maintenance programmes         |                  |
|                      | Can liaise with the client to ensure technical and operational documentation is maintained in        |                  |
| e)                   | accordance with the client company requirements  |                  |
| f)                   | Can suggest improvements that can be made to administrative procedures as carried out offshore       |                  |

| Witness name:<br>(If applicable in assessment plan) | Date: |                      |
|---|-------|----------------------|
| Assessor name:                                      | Date: |                      |
|   |       | © MTCS Ltd. 1/4/2019 |