

## Competence 3

### Can demonstrate leadership skills

*This meets the requirements of IMCA*

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
a)	Can perform 'tool box' talks prior to carrying out workshop activities	
b)	Can liaise with the management where necessary on operational matters	
c)	Demonstrates effective leadership skills to colleagues	
d)	Can coach colleagues in the use of equipment and systems	
e)	Can recognise strengths and weaknesses in colleagues and offer encouragement where necessary	

Witness name: (If applicable in assessment plan)		Date:	
Assessor name:		Date:	