

THIRD PARTY REPORT GUIDELINES / EVIDENCE GATHERING

Instructions to the Candidate and Supervisor

- You must observe the candidate using only the approved practical assessment documents.
- Sharp5 is required to gather and assess evidence of the candidates
- The Third Party Report should be completed by a supervisor, employer or someone with appropriate working at heights experience who directly observes and comments on the candidate's application and demonstration of the relevant skills and knowledge while performing a range of tasks in the work environment. In this form, such a person is called the 'Supervisor'.
- The Supervisor should not be a relative, close friend or someone who could have a conflict of interest.
- If the Supervisor believes the candidate needs to further develop their skills, please make the appropriate comments on this form.
- Sharp5 may contact the Supervisor (by phone) to clarify the contents of the Third Party Report. Where this is necessary, the Unit of Competency will not be issued until this has occurred.
- Once completed, forward the document to Sharp5 by either:

Email: admin@sharp5.com.au

Post: PO Box 666 Mackay QLD 4740

Important: This step is a mandatory part of the assessment process for this Unit of Competency. Sharp5 will use the information in this report as well as online course and assessment questions (which the candidate has already completed on their own) to assess whether the Candidate is competent for this Unit.

Sharp5 cannot finalise completion of this course nor award the Statement of Attainment until the Third Party Report is received and assessed by a Qualified Assessor. Submitting this form does not guarantee issuance of the Statement of Attainment for this Unit. A Qualified Assessor at Sharp5 will review it to deem competence. Sharp5's Assessor will contact the candidate if further actions or evidence are required to deem competence for the Unit of Competency.

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Name of Candidate	
RTO:	Sharp5 Industry Training RTO #40478
Unit(s) of competency	RIIWHS202E Enter & Work in Confined Spaces

Name of Supervisor		
How long have you known the candidate?		
Workplace name and address		
Supervisors job title		
Daytime phone number		
What is your relationship with the candidate?	Employer	
	Manager/Supervisor	
	Colleague	

INSTRUCTIONS TO SUPERVISOR

You will need to observe the candidate on at least two different occasions complete entering and working in a confined space tasks. Complete the below checklist by confirming Yes (Y) or No (N) when they are completing the tasks to record that you identified them correctly demonstrating each task to the criteria listed.

N.B. the criteria listed has been expanded and a variety of observable actions, skill and or knowledge have been provided, not all of these will apply to all occasions, so you must only identify those you have observed and or you may add your own if they are not listed here in the section listed 'other'.

You must only record what you have observed and you may circle or write at each criteria if that is necessary to provide an accurate representation of the observed tasks.

You must include a JSA completed by the candidate for each task below, you may use the JSA template provided or your own JSA format if you wish. You must include

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Description of task 1						
Location & Date						
Atmospheric readings /	Туре	O2%	CO PPM	CH4 %	H2S	TIME
Bump Test						
Pre-Entry Reading #1						
Pre-Entry Reading #2						
Reading during work						
Reading during work						

Description of task 2						
Location & Date						
Atmospheric readings /	Туре	O2%	CO PPM	CH4 %	H2S	TIME
Bump Test						
Pre-Entry Reading #1						
Pre-Entry Reading #2						
Reading during work						
Reading during work						

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Third Party Observation

PERFORMANCE EVIDENCE	S / NYS	S / NYS
Evidence is required to be collected that demonstrates a candidate's competency in this unit. Evidence must be relevant to the roles within this sector's work operations and satisfy all of the requirements of the performance criteria of this unit and include evidence that the candidate:	Task 1	Task 2
Locates and applies relevant documentation, policies and procedures		
 Risk Assessment templates, Permit books, Confined Space Register, Workplace Confined Space Entry Standards / Procedure 		
Demonstrates completion of entering and working in confined spaces that efficiently meets all of the required outcomes on more than one (1) occasion in		ectively and
Obtain the required entry permit and instructions for performing work in confined space:		
JSA / Permit completed by candidates based on work activity		
Interpreting and applying workplace procedures:		
JSA / Permit instructions followed and observed during work activity		
Apply tagging and lock out procedures;		
 Student performs isolation and appropriate lock / tagging of space in accordance with permit requirements 		
Selecting, wearing and caring for personal protective equipment;		
 Student identifies appropriate PPE as per the JSA and or permit 		
 Student observed applying PPE required as per permit 		
Using atmospheric monitoring devices prior to entering the confined space:		
 Student conducts and record simulated pre-entry test results as directed by trainer 		
Entering the confined space:		
Student observes permit conditions for scenario provided		
Working in the confined space:		
 Student can identify range of tasks / hazards, equipment and PPE that could be required while working in the simulated space 		
Using atmospheric monitoring devices during the confined space activity:		
 Student performs and records a range of atmospheric monitoring in the simulated space, includes breathing or general body, at ground / depth and at ceiling / height 		
Applying safe materials handling methods:		
 Student identifies and explains safe material handling relevant to the simulated space and task 		
Exiting the confined space:		
Student follows permit requirements, including		
removal of tools / equipment,		
communication with relevant personnel,		
 closing of the confined space, sign off permit 		

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Remove tagging and lock out:	
 Student removes personnel lock / isolation device as per permit requirements 	

Acknowledgement of completion of Third Party Report Tasks				
I	acknowledge that I have directly and individu			
	has been observed by me completing the wor presents in context the workplace situation.	k safely at heigh	nts tasks listed that	
Supervisor's signature		Date		
Candidate's name		Date		
Candidate's signature		Date		
Further comments by supervise	or (if applicable)			

FOR SHARP5 OFFICE USE ONLY	
Outcome	
Competent	
Not Yet Competent	
Assessor comments (if applicable)	·
Assessor Name	
Assessor Signature Date	

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