

ANNEX C - TEST CERTIFIER ASSESSMENT FORM - SUBSTANCES

Format

When a person making an application to be a test certifier under s82 of the HSNO Act 1996, regulation 11 (4)(a) of the Personnel Qualifications Regulations 2001 requires that all evidence provided to support the application must be presented in a specific format, namely:

*“In deciding whether or not to approve a person as a test certifier, the Authority may regard as sufficient evidence a written record, - (a) in the case of the requirement specified in subclause (1) or (2), signed by a person who has trained or **assessed the person** and **describing the method of assessment** of the knowledge and practical skills of the person, and the **results of that assessment**”.*

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Assessment – Substances

ASSESSEE: _____

ASSESSOR: _____

DATE: _____

This serves to confirm that I assessed the assessee’s knowledge of the various substances or classes of substances listed in the table below.

(Insert date in appropriate column for each substance or class of substance).

Substance or Class of Substance	Hazard classification	Adverse effects	Controls



I confirm that assessee’s knowledge of substances was assessed using the following method _____ (*interview or test*) against the

_____ (*name the applicable regulation or standard*).

I confirm that the assessee successfully identified the hazard classifications, adverse effects and controls of the various substances and that they diligently followed the above mentioned regulatory tools to derive at their answer.

I am confident that the assessee has a satisfactory knowledge of substances and that they have demonstrated that they can meet all legislative requirements in this regard.

Assessor’s signature: _____

Assessor’s qualification/designation: _____

Assessor’s knowledge of **substance** was attained by? (*tick appropriate circle*)

- successfully completing training course (provided full details)**
- industry experience, (provide details)***
- current test certifier,*
- HSNO enforcement officer,*
- other (provide details)*

(**Course name, course criteria, name of trainer, date of training*)

(** *Details of industry experience*)

