



Workers Name			Date		
LVR CoC No.			Classification		
Depot			Boiler Quals (or n/a)		
Train Number		From		To	
Traction (circle)	Steam		Diesel		Rail motor
Locomotive No.			Assessor		

C indicates that the desired competency required has been demonstrated.

T indicates that additional training is required.

Subject:	C	T	Comments:
1.0 Pre commencement responsibilities			
1.1 Sign On Requirements			
1.2 Crew Brief (Including Shunt Plan)			
1.3 Drug & alcohol awareness			
1.4 Fatigue Management			
1.5 Appearance/Attitude/Teamwork			
1.6 Safeworking Equipment			
1.7 PPE Requirements			
2.0 Test Communications			
2.1 Radio Protocol			
2.2 Emergency Response/Preparedness			
3.0 Train preparation			
3.1 Fault Reporting Procedures			
4.0 Shunting Procedures			
4.1 Shunting Using Handsignals			
4.2 Shunting Using Radio			
4.3 Ensuring Three Step Protection Is Applied			
4.4 Apply and Release Handbrakes			
4.5 Couple and Uncouple Vehicles			
4.6 Couple and Uncouple Air Hoses			
4.7 Couple and Uncouple Electrical Lines			



4.8 Cutting In and Out of Air Brakes			
5.1 Remain Vigilant within a Rail Yard			
5.3 Conduct Roll By's on Rail Traffic			
6.0 Stabling Responsibilities			
6.1 Securing Rolling Stock			

I have assessed the above employee and find that they are competent/not competent in the listed the duties.

Assessors Name _____ Classification _____

Assessors Signature _____ Date _____

I do agree that the above is a fair and impartial assessment.

Workers Name _____ Date _____

Workers Signature _____