

OPERATOR EXPERIENCE, COMPETENCE & PROFESSIONAL DEVELOPMENT DECLARATION

I endorse that the operator seeking re-registration is competent to be registered at the classification level(s) sought.

I declare that the information contained in this employment statement, or attached by me to this statement, is complete and true to the best of my knowledge and that the applicant; in my opinion, has the experience and is competent to perform the work described therein.

Experience

The applicant has been employed in an operational role for a minimum of 2 years in the preceding 3 year period.

Yes No

Competence

The applicant can competently operate the water treatment processes at Microbiological Risk Classification Level 3.

Yes No

The applicant can competently operate the water treatment processes at Microbiological Risk Classification Level 4.

Yes No

Professional Development

I verify the applicant has participated in the professional development activities listed in the application sections of Accredited Training, Non-Accredited Training, Other Activities, Significant Workplace Project and/or Exceptional Activities.

Yes No

Name of Suitably Qualified Person _____

Signature of Suitably Qualified Person _____

Date

____ / ____ / ____
Date Month Year