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| SIGNALS COMPETENCY ASSESSMENT REQUEST | RIW ID # | xxxxxx |
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| **A. Competency Classification Request** |   |
| Name: |        |
| Address: |       |
|  |       |
|  |       | Postcode: |       |
| Telephone #: |       | Email: |       |
| Organisation: |       | Position: |       |
| Location: |       |
|  |
| **B. Certificates and Records for Training and Education** (These are uploaded to Rail Industry Worker portal): |
| 1) | [ ]  | Primary Qualification. Education Training relating to competencies to be assessed (e.g. Electrical IV Certificate or Engineering Degree). Provide a scanned copy of the Qualification and Academic Record. |
| 2) | [ ]  | Training Course Certificates from Rail Industry suppliers and training related to Signalling specific tasks and signalling equipment specific training. |
| 3) | [ ]  | Training & Education Record Form F26 or equivalent |
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| **C. Work Experience Record** (These are uploaded to Rail Industry Worker portal): |
| 1) | [ ]  | Work Experience Record (mandatory to provide Work Experience Record for all work over previous 5 years). Use form F25B or equivalent. This must be verified by suitable Supervisors. Alternative formats must contain full information. |
| 2) | [ ]  | Form F25A Work Experience Record – Verification Supervisors Declaration must be completed and submitted. Alternatives are not accepted. |
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| **D. Standards Induction & Safety Inductions** (These are uploaded to Rail Industry Worker portal): |
| 1) | [ ]  | I confirm that I have completed the ARTC Signals Standards Induction.  |
| 2) | [ ]  | I confirm that I have completed the ARTC National Contractor Induction.  |
|  |
| **E. Assessment Checklist and Work Experience Records** (These are uploaded to Rail Industry Worker portal): |
| I confirm that all of the information in:* the ***Applicant Assessment Checklist*** is true and correct and fully reflects my qualifications, training and
* the ***Work Experience Record*** truly details work that I have performed and the responsibility level.
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| **F. Restrictions** (see also section L – G) |
| List any suspensions, cancellations or related restriction on any Competency Certificates or performance of Signalling tasks or rail safety tasks that have occurred in the previous 5 years for any accredited rail operator. |
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| **G. Declaration** |
| ***I Declare that the information on this form and files uploaded to Rail Industry Worker is true and correct and fully provides all relevant details for the Assessment of my Signalling Competencies.*** |
| **Signature:** |  | **Name:** |       | Date: |       |
| **Witness (Organisation Representative or other witness)** |
| **Signature:** |  | **Name:** |       | Date: |       |

**SIGNALS COMPETENCY ASSESSMENT REQUEST**

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| Name:       | RIW xxxxxx |  |
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| **H. Consent (To be completed by applicant: Consent to conduct reference checks)** |
| By signing this form you give ARTC (and/or agent(s) engaged by us) your informed consent to collect, use and provide personal information about you from third parties for the purpose of verifying your experience and qualifications and to assist us in assessing your Signalling Competencies and your ability to perform Rail Safety Work. |
| I, [Print Name] |  | (the Applicant) |
| 1. Consent to ARTC, or my employer (while performing Rail Safety Work for ARTC) undertaking reference checks for any information required to assess my signalling competencies and suitability to perform Rail Safety Work; and |
| 2. Direct ARTC, or ARTC contractor performing Rail Safety Work to provide factual information if sought, including information drawing on my records with regard to performance of signalling competencies and/or Rail Safety Work, and consent to you doing so; and |
| 3. Undertake to inform ARTC, in a timely manner, of any significant change in my circumstances that results in other information previously provided becoming out of date, incomplete or inaccurate; and |
| 4. Understand that this consent and direction will continue in force until you are notified in writing that I have revoked it; |
| Signature: |  | Date: |       |
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| **I. Direction (To be completed by applicant: Direction to provide Answers)** |
| By signing this form you direct Organisations to share specific information about you, for the purpose of verifying your experience and qualifications and to assist us in assessing your Signalling Competencies and your ability to perform Rail Safety Work. |
| I, [Print Name] |  | (the Applicant) |
| 1. Have applied for a Signalling Certificate of Competency from ARTC; and |
| 2. Direct every current/previous Organisation to share the **Answer(s)** with ARTC and any Organisation undertaking the Assessment of Signalling Competencies and Rail Safety Work; and |
| 3. Give each Organisation and its Workers a release limited to all legal responsibility in relation to any loss, damage, or claim arising from: (a) sharing or relying on the Answer(s), or (b) any omission from the **Answer(s);** unless arising from any malicious, fraudulent, deliberately false or deliberately misleading statement or omission; and |
| 4. Consent to every current/previous Organisation sharing any factual information about my employment or engagement with any prospective Organisation; and |
| 5. Release every current/previous Organisation from all confidentiality obligations to the extent that they impede its ability to share any relevant factual information about my undertaking Rail Safety Work including signalling work; and |
| 6. Understand that this consent and direction will continue in force until you are notified in writing that I have revoked it; |
| Signature: |  | Date: |       |
| ***Answer(s)*** *means all information provided in response to inquiries relating to Signalling Competencies and performance of Rail Safety Work****.*** |
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| **J. Declaration** |
| **I Declare my agreement to comply with all relevant Policies and Legislative requirements for:*** **Drugs and Alcohol Policy; and**
* **Occupational Health and Safety; and**
* **Fatigue Management.**
 |
| **Signature:** |  | **Name:** |       | Date: |       |
| **Witness (Organisation Representative)** |
| **Signature:** |  | **Name:** |       | Date: |       |

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| SIGNALS COMPETENCY ASSESSMENT REQUEST  |
| Name :       | RIW xxxxxx |  |
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| **K. Access to ARTC Standards** |
| I confirm: |
| [ ]  | That I have access to the ARTC Standards on the ARTC . |
| [ ]  | This access is via the internet access with email account: ***(hotmail, gmail, yahoomail etc are not acceptable)*** |
|  | Email address: |       |

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| **L. *Applicant Agreement to ARTC Standards*** |
| By signing this form ‘Signals Competency Assessment Request’ you confirm each of the following items if you are successful in gaining an ARTC Statement of Competency. |
| I, [Print Name] |       | (the Applicant) |
| 1. The Applicant hereby agrees to perform all work in accordance with ARTC Standards, Procedures and Practices and Instructions. The applicant agrees to maintain access to the ARTC Standards documents by means of the Engineering Extranet. The applicant agrees to regularly review (at least every 3 months) the recent changes register on the Engineering Extranet and to study and apply all new standards and related information in the performance of work on ARTC infrastructure.
 |
| 1. The Applicant agrees to not perform work for which he/she does not have a valid Certified Competency. The Applicant agrees to perform work at a higher skill level only under supervision and mentorship of a suitably qualified person with a valid certified competency. That the Applicant agrees that for all skills with a level 1 competency will be performed under the supervision of a suitably competent person.
 |
| 1. The Applicant agrees when managing other staff, they will ensure that the staff have the competency certification for the work being performed before they commence the work. That the Applicant will not direct staff to perform work for which they do not have the appropriate competency certification. That they will ensure that all staff performing with a level 1 skill have appropriate supervision at all times by a suitably competent person. That all staff with a level 2 skill will have an appropriately competent mentor when working at level 3.
 |
| 1. The Applicant agrees to maintain a Work Experience Record / Logbook in accordance with ARTC Competency Standards, for all work undertaken over the previous 5 years and to make this available for any future Competency Review.
 |
| 1. The Applicant agrees to manage access to ARTC infrastructure locations, information and documents. The applicant agrees to share or distribute this information only in so far as it is required for the approved work and tasks.
 |
| 1. The Applicant agrees to comply with any ARTC policy for security of keys for ARTC locations and equipment. The applicant agrees that any security keys that are applicable to ARTC locations or equipment will not be lent out for any reason. The applicant further agrees to keep safe these keys and not to allow them to be copied in any manner.
2. The applicant agrees to notify signalscompetency@artc.com.au within 7 days of any suspensions, cancellations or related restriction on any Competency Certificates or performance of Signalling tasks or rail safety tasks with any other organisation in Australia.
 |
| **Signature:** |  | Date: |       |
|  |
| Witness | (Organisation representative) | Organisation:       |
| **Signature:** |  | **Name:** |       | Date: |       |
|  |

***Scan and submit this form to the Rail Industry Worker portal*.**