## Completion of Competency Record

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Student Name** | Lilly Le | | | |
| **Unit Code and Title** | FSKLRG011 Use routine strategies for work-related learning | | | |
| After assessment instrument have been completed, the competency record should be completed and signed by the assessor, the workplace supervisor (if applicable) and student. If competency is not achieved at the first attempt, strategies to address gaps in performance need to be identified and times for reassessment arranged. | | | | |
| **Assessment Tasks (please list)** | | | | **Result** |
| **Knowledge questions** | | | | Satisfactory  Not Satisfactory |
| **Project** | | | | Satisfactory  Not Satisfactory |
| **Observation checklist** | | | | Satisfactory  Not Satisfactory |
| **The evidence presented is:** |  | **Valid Sufficient Authentic Current** | | |
| **Feedback to student** |  | | | |
| **Final Result** | **Competent**  **Not Competent** | | **Date** |  |
| **Student Declaration**  I declare all assessments submitted are my own work with the exception of where I have listed or referenced documents or work. | | | **Assessor Declaration**  I declare that I have conducted valid assessments fairly, flexibly and reliably. | |
| Signature: REDACTED | | | Signature: | |

|  |  |
| --- | --- |
| **Supervising Assessor Declaration (to be completed by a qualified TAE assessor)**  I observed the Assessor conduct valid assessments fairly, flexibly and reliably.  I verify that assessment outcome as determined by the assessor is verified. | |
| Signature: | Date: |
| A pair of glasses  Description automatically generated with medium confidence |  |

**Self-Reflection – TAEASS402 – Assess competence**

|  |  |  |  |
| --- | --- | --- | --- |
| Thinking about the processes you have followed to assess competency: | Yes | No | Opportunities for improvement  (what would you change in the future) |
| **Did you prepare fully for the assessment by** | | | |
| * Understanding the assessment process |  |  |  |
| * Being aware of any legal and ethical requirements |  |  |  |
| * Being aware of the requirements of the Unit of Competency being assessed |  |  |  |
| * Having access to marking guides and checklists |  |  |  |
| * Discuss and agree on the assessment plan with the candidate |  |  |  |
| * Identify any specialist support required and organise this if necessary |  |  |  |
| **Did you gather quality evidence by** | | | |
| * Using the agreed assessments methods and tools – involving a range of activities |  |  |  |
| * Apply the principles of assessment |  |  |  |
| * Apply the rules of evidence |  |  |  |
| **Did you support the candidate by** | | | |
| * Communicating effectively – providing appropriate feedback |  |  |  |
| * Making reasonable adjustments if required |  |  |  |
| * Addressing any WHS risks to a person or equipment immediately |  |  |  |
| **Did you make assessment decisions by** | | | |
| * Collecting and evaluating the evidence |  |  |  |
| * Using judgement to determine if sufficient and valid evidence has been submitted |  |  |  |
| * Using marking guides and exemplars |  |  |  |
| * Following the assessment plan |  |  |  |
| **Did you record and report the assessment decision by** | | | |
| * Recording the outcome on the assessment coversheet, providing feedback on this activity and signing all documentation |  |  |  |
| * Completing the Completion of Competency Record, providing overall feedback and signing all documentation |  |  |  |
| **Did review the assessment process by** | | | |
| * Discussing the assessment outcome with the candidate or other stakeholders |  |  |  |
| * Completing an assessment trial and review |  |  |  |
| * Considering other changes you would make when doing this assessment in future. |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of student | Lilly Le | | | | Date |  |
| Name of Assessor |  | | | | | |
| Unit/s (code and name) | FSKLRG011 Use routine strategies for work-related learning | | | | | |
| Method of assessment | **Knowledge questions** | | | | | |
| **Instructions** | | | | | | |
| * This assessment consists of 3 activities * Answers must be clear, concise and in your own words * All writing, notes and responses to be done in the spaces provided, in pen * You must answer all questions or complete the activities correctly to be deemed competent in this unit * Re-assessment of any incorrect responses will be undertaken verbally and noted on the assessment * Identified special needs students may be able to undertake this assessment in a slightly different way please speak with your assessor if you believe that you are eligible for a modified assessment item | | | | | | |
| **Declaration**  I declare that no part of this assessment has been copied from another person’s work with the exception of where I have listed or referenced documents or work and that no part of this assessment has been written for me by another person.  Signed: xxxxxxxxxxxxxxxx Date: | | | | | | |
| **EDUCATIONAL ADJUSTMENTS MADE** | | | | | | |
| Formatting | Altered print size and layout  Audio Provided  Images to support text  Simplified language | | | | | |
| Time | Extra Time  Rest Break  Administered in segments | | | | | |
| Assistive Technology | Word Processor  Speech to text  Calculator | | | | | |
| Environmental | Alternate location  Reduced audience  Support person present | | | | | |
| **Satisfactory**  **Not Satisfactory** | | | **Due date for reassessment**  **(if required):** |  | | |
| **Feedback to student:** | | | | | | |
|  | | | | | | |
| **Assessor Signature:** | |  | | | | |

|  |  |
| --- | --- |
|  | **S**  **NS**  **S**  **NS** |
|  | **S**  **NS** |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of student | Lilly Le | | | | Date |  |
| Name of Assessor |  | | | | | |
| Unit/s (code and name) | FSKLRG011: Use routine strategies for work-related learning (Release 1) | | | | | |
| Method of assessment | **Project** | | | | | |
| **Instructions** | | | | | | |
| * This assessment consists of 3 activities * Answers must be clear, concise and in your own words * All writing, notes and responses to be done in the spaces provided, in pen * You must answer all questions or complete the activities correctly to be deemed competent in this unit * Re-assessment of any incorrect responses will be undertaken verbally and noted on the assessment * Identified special needs students may be able to undertake this assessment in a slightly different way please speak with your assessor if you believe that you are eligible for a modified assessment item | | | | | | |
| **Declaration**  I declare that no part of this assessment has been copied from another person’s work with the exception of where I have listed or referenced documents or work and that no part of this assessment has been written for me by another person.  Signed: Date: | | | | | | |
| **EDUCATIONAL ADJUSTMENTS MADE** | | | | | | |
| Formatting | ☐ Altered print size and layout ☐ Audio Provided ☐ Images to support text  ☐ Simplified language | | | | | |
| Time | ☐ Extra Time ☐ Rest Break ☐ Administered in segments | | | | | |
| Assistive Technology | ☐ Word Processor ☐ Speech to text ☐ Calculator | | | | | |
| Environmental | ☐ Alternate location ☐ Reduced audience ☐ Support person present | | | | | |
| **Satisfactory**  **Not Satisfactory** | | | **Due date for reassessment**  **(if required):** |  | | |
| **Feedback to student:** | | | | | | |
|  | | | | | | |
| **Assessor Signature:** | |  | | | | |

Students are to complete the following booklet.

**TASK 1 – About Me**

1. How did I go in class Last Term?

|  |  |  |  |
| --- | --- | --- | --- |
| Subjects studied in Term 1 | Academic Results | Effort Results | Behaviour Results |
| Maths | C | C | B |
| English | B | B | B |
| Science | B | B | B |
| Humanities | B | B | B |
| HPE | B | B | B |
| Elective 1: Digital  Technology | B | B | B |
| Elective 2:Business | B | B | B |

|  |
| --- |
| **S**  **NS** |

1. General Improvements: What can I try to do better this term (place a  or a x in the boxes that you can improve on).

|  |  |
| --- | --- |
| Areas for Improvement | Work on in this Term |
| Academic Results | X |
| Behaviour in class | X |
| Completion of homework/assignments | X |
| Relationships with teachers |  |
| Punctuality | X |
| Attitude to learning | X |
| Relationships with peers | X |

|  |
| --- |
| **S**  **NS** |

1. Study Habits: What can I try to do better this term (place a  or a x in the boxes that you can improve on).

|  |  |
| --- | --- |
| Study Habit | Work on in This Term |
| Completion of homework | X |
| My organisation for learning |  |
| My study timetable | X |
| My time management | X |
| Thinking through tasks more carefully | X |

|  |
| --- |
| **S**  **NS** |

1. Brainstorm pathways open to Year 10 students

# TAFE

University

PATHWAYS

Part time work

Full time work

Apprenticeship

School based

traineeship

Fruit picking

Overseas

gap year

Volunteering

|  |
| --- |
| **S**  **NS** |

**TASK 2 – My Career Profile**

**All remaining activities have not been completed - student away from school and did not return before the end of term.**

|  |
| --- |
| **S**  **NS** |

## Observation Checklist

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Unit Code** | FSKLRG011 | | **Unit Title** | | | Use routine strategies for work-related learning | | | | | |
| **Student Name:** | **Lilly Le** | | | | | | **Assessor Name:** |  | | | |
| **Assessment/evidence gathering conditions:** | | | | | | | | | | | |
| Instructions:   * Assessors are to ensure that students have read the Student Handbook and understand the assessment process. * Assessors are required to observe the student successfully carry out work tasks applicable to this unit in real or simulated work conditions. * Assessors must reference the unit of competence and training materials to ensure that they are fully conversant with the standards required before signing off on a student’s satisfactory performance. * All work tasks associated with each element May be assessed together to show industry appropriate workflow. * Observation of the student should be completed over a number of occasions and in different contexts where possible. This helps to ensure that sufficient evidence is collected for a reliable judgment to be made about the skills the student has demonstrated against the requirements of the unit. Each task should be formatively assessed during the training process. The “date observed” columns are to be signed off as summative assessment when the assessor observes the student confidently perform the tasks correctly, completely and without supervision. * If questions are asked during the observation, notes and student responses can be noted in the “feedback/notes” section or the back of the document. * If a student is observed incorrectly performing a task, the assessor should make a note in the comments sections along with the date. The student should then be retrained or reminded how the task should be performed correctly. | | | | | | | | | | | |
| **EDUCATIONAL ADJUSTMENTS MADE** | | | | | | | | | | | |
| **Formatting** | Altered print size and layout  Audio Provided     Images to support text  Simplified language | | | | | | | | | | |
| **Time** | Extra Time      Rest Break     Administered in segments | | | | | | | | | | |
| **Assistive Technology** | Word Processor     Speech to text     Calculator | | | | | | | | | | |
| **Environmental** | Alternate location       Reduced audience      Support person present | | | | | | | | | | |
| **Student Declaration** | I have been provided with instructions about the assessment task and understand what is required of me to achieve a satisfactory result | | | | | | **Student Signature** | |  | | |
| **Dimensions of Competency and Foundation Skills**  **When completing work tasks, did the student:** | | | | | | | | | | | |
| Implement safe working practices? | | Y | | N | Work well with others? | | | | | Y | N |
| Perform and manage tasks effectively and efficiently? | | Y | | N | Communicate effectively? | | | | | Y | N |
| Complete tasks within required timeframes? | | Y | | N | Use technology effectively? | | | | | Y | N |
| Make decisions and solve problems in non-routine situations? | | Y | | N | Demonstrate appropriate level of language, literacy and numeracy for the workplace? | | | | | Y | N |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Element** | **#** | **Observation Item** | **Assessor**  **Initial/**  **Date** | **Assessor**  **Initial/**  **Date** |
| Prepare for learning | **1** | Identify work-related learning goals |  |  |
| **2** | Investigate a range of formal and informal learning pathways |  |  |
| **3** | Investigate a range of approaches to achieve goal |  |  |
| **4** | Identify potential barriers to learning |  |  |
| Use strategies for learning | **5** | Identify a preferred approach to achieving work-related learning goals |  |  |
| **6** | Identify strategies to address barriers to achieving learning goals |  |  |
| **7** | Propose routine learning strategies to achieve learning goal |  |  |
| **8** | Create and use a learning plan to implement strategies |  |  |
| Review own learning progress | **9** | Monitor progress against the plan |  |  |
| **10** | Seek feedback from an appropriate person |  |  |
| **11** | Identify areas for further learning and training |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Feedback/Notes** | | | |
| **Lilly exited training before this observation could be completed!** | | | |
| **Student Signature** |  | **Assessor Signature** |  |

Satisfactory / Not Satisfactory