

Scouts Australia Institute of Training

(SAIT) – RTO 5443

*RPL Assessment Tool Kit*

*SIS20419*

*Certificate II in Outdoor Recreation*

|  |  |
| --- | --- |
| Candidate’s Name |  |
| Assessor’s Name |  |

Issued by Scouts Australia Institute of Training (SAIT)

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Scouts Australia Institute of Training (SAIT) - Registered Training Organisation No 5443.

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# Recognition of Prior Learning (RPL) Assessment Tool Kit

This RPL Assessment Tool Kit has been developed by the Scouts Australia Institute of Training (SAIT) in consultation with industry, as a resource to assist Candidates seeking RPL and for RPL Assessors, by providing a set of assessment instruments which can be used to conduct whole and part of qualification RPL. This information can be utilised by both Assessor and Candidate.

This assessment kit has been validated by the SAIT to ensure it meets the required Standards for Registered Training Organisations (RTOs), relevant Training Package requirements and Registered Training Organisation (RTO) policies.

**Qualification description**

This qualification reflects the role of individuals who assist with operational logistics and the delivery of recreational activities. They work under direct supervision and with guidance from those responsible for planning, finalising and delivering activities, including program managers and leaders. Assistants use a range of fundamental activity techniques during activities and can work in indoor and outdoor recreation environments, adventure learning centres or camps. The combined skills and knowledge provided by this qualification do not provide for a job outcome as a leader and further training would be required before moving into those roles. This qualification provides a pathway to work for any type of organisation that delivers outdoor recreation activities including commercial, not-for-profit and government organisations.

Therefore, Scouting has identified that this qualification may relate to your role in Scouting.

# How to use this Tool Kit

This kit is divided into sections as follows:

**SECTION A – Overview of Units of Competency**

**SECTION B – Candidate Self-Evaluation**

To have skills formally recognised in the national system, Assessors must make sure that the Candidate has the skills and knowledge to meet industry standards. This section provides a self-evaluation checklist which asks the Candidate to reflect on their performance in the workplace.

**SECTION C – Professional Competency Conversation**

In this section several questions are posed that relate to the elements of competency for each Unit of Competency. This will form the basis for the Candidate’s conversation with the Assessor. The Candidate should take time to prepare to answer questions, provide evidence and discuss these with the Assessor. The Candidates responses will be recorded as evidence of their competence.

**SECTION D – Third Party (Referee) Verification**

This section provides an example template that may be used by the Candidate’s referees to validate the Candidates skills and experience in this qualification. The referee may fill out the appropriate form and return it to the Assessor.

**SECTION E – Assessment Instruments and Assessor’s Assessment**

The Assessment Instruments provides a guide to the evidence required to support the Candidate’s claim for RPL.

The Assessment Instruments and Assessment Summary to be completed by the Assessor and uploaded onto aXcelerate.

**Assessors please note:**

**The Assessor is required to upload into aXcelerate the completed RPL Tool Kit, Third Party Report, documentary evidence provided by the Candidate, Assessment Instruments and the Assessment Summary.**

# SECTION A - Overview of Units of Competency

This RPL Assessment Tool Kit contains four (4) units of competency.

|  |  |
| --- | --- |
| **Unit Code** | **Title** |
| **CORE** | |
| HLTWHS001 | Participate in work health and safety |
| SISOFLD001 | Assist in conducting recreation sessions |
| SISOFLD002 | Minimise environmental impact |
| SISXIND002 | Maintain sport, fitness and recreation industry knowledge |

Details of each unit of competency can be found at <https://training.gov.au/>

**Packaging Rules**

The Packaging Rules for this qualification are that twenty-seven (27) units of competency must be completed as follows:

* 4 core units plus
* 7 elective units, consisting of:
* 3 units from Group A.
* 4 units from Group A, Group B, **elsewhere in the SIS Training Package, or from any other current training package or accredited course**.

The selection of electives must be guided by the job outcome sought (i.e., Scouting related).

Electives which appear in italics have prerequisite units of competency, which are also listed within their appropriate group.

Elective units

|  |  |
| --- | --- |
| Group A Activity units | |
| SISCAQU002 | Perform basic water rescues |
| SISOABS001 | Abseil single pitches using fundamental skills |
| SISOBWG001 | Bushwalk in tracked environments |
| SISOCLM001 | Top rope climb single pitches, artificial surfaces |
| SISOCLM002 | Top rope climb single pitches, natural surfaces |
| SISOCNE001 | Paddle a craft using fundamental skills |
| SISOCVE001 | Traverse caves |
| SISOCYT001 | Set up, maintain and repair bicycles |
| SISOCYT002 | Ride bicycles on roads and pathways, easy conditions |
| SISOCYT004 | Ride off road bicycles on easy trails |
| SISODRV001 | Drive AWD/4WD vehicles on unsealed roads |
| SISOEQU001 | Handle horses |
| SISOEQU002 | Ride horses using fundamental skills |
| SISOFLD006 | Navigate in tracked environments |
| SISOFSH001 | Locate, attract and catch fish |
| SISOFSH002 | Select and catch bait |
| SISOFSH003 | Select and rig tackle outfits |
| SISOKYS001 | Paddle a sea kayak in enclosed waters |
| SISOPWC001 | Ride personal watercraft in smooth water conditions |
| SISOSAI001 | Sail small boats in smooth water and light to moderate wind conditions |
| SISOSCB001 | SCUBA dive in open water to a maximum depth of 18 metres |
| SISOSCB002 | SCUBA dive from boats |
| SISOSCB004 | Navigate prescribed routes underwater |
| SISOSKT001 | Ski on easy cross country terrain |
| SISOSNK001 | Snorkel |
| SISOSRF001 | Surf small waves using basic manoeuvres |
| SISOSUP001 | Paddle a stand up board on inland flatwater |
| SISOWIN001 | Windsurf in smooth water and light wind conditions |
| Group B General electives | |
| HLTAID003 | Provide first aid |
| ICTICT203 | Operate application software packages |
| MEM50008 | Carry out trip preparation and planning |
| MEM50009 | Safely operate a mechanically powered recreational boat |
| MEM50010 | Respond to boating emergencies and incidents |
| SISXCAI001 | Provide equipment for activities |
| SISXCCS001 | Provide quality service |
| SISXEMR001 | Respond to emergency situations |
| SISXFAC001 | Maintain equipment for activities |
| SISXFAC002 | Maintain sport, fitness and recreation facilities |
| SISXFIN002 | Process financial transactions |
| SITXCOM002 | Show social and cultural sensitivity |
| SITXFSA001 | Use hygienic practices for food safety |
| SITXFSA002 | Participate in safe food handling practices |
| TLIB0002 | Carry out vehicle inspection |
| TLIB2008 | Carry out inspection of trailers |
| TLIH3002 | Plan and navigate routes |

# SECTION B - Candidate Self-Evaluation of the Core Units

The purpose of completing the Self-Evaluation Form is to enable Candidates who believe that they already possess the competencies, to assess their skills and knowledge against the qualification.

Complete the following pages and identify your capacity to perform the tasks described. Be honest in your appraisal. By completing this self-evaluation, you will be identifying the areas where you may be able to apply for recognition.

**NB: If this self-evaluation is being used as evidence**, your Scouting Team Leader must evaluate your ability to perform the work tasks. Your Supervisor is also asked to comment on your ability to perform these work tasks and verify this by signing at the completion of this Section.

If this self-evaluation is being used only so that you and your Assessor can decide if you should proceed, then it does not have to be verified.

Identify your level of experience in performing each competency/task by using the following:

* Not well – I do the task but not well.
* Well – I do the task well.
* Very well – I do the task very well.

**See example below:**

| **Competency/Task** | **I have performed these tasks** | | | **Supervisor’s Evaluation** | **Evidence to support claim** | |
| --- | --- | --- | --- | --- | --- | --- |
| **Frequently** | **Never** | **Sometimes** | **Doc No.** | **Documentation provided** (Number and name the document you are providing for easy reference) |
| Using a computer to enter or change work information or data. | ❑ |  | Not Well | Not Well |  |  |
| Using personal protective equipment as appropriate to conduct my work safely and in accordance with site and legal requirements. | Well |  | ❑ | Well | *1* | *Copy of Company Personal Protective Equipment Requirements for my job role and photos using the equipment.* |

| **CORE Competency/Task** | | **I have performed these tasks** | | | **Supervisor’s Evaluation** | | **Evidence to support claim** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Frequently** | **Never** | **Sometimes** | **Doc No.** | | **Documentation provided** (Number and name the document you are providing for easy reference) |
| 1. I have participated in WHS during activities | |  |  |  |  | |  | |  |
| 1. I have assisted in conducting recreation sessions | |  |  |  |  | |  | |  |
| 1. I have minimised environmental impact during activities | |  |  |  |  | |  | |  |
| 1. I have maintained sport, fitness and recreation industry knowledge | |  |  |  |  | |  | |  |
| **Scouting Team Leader’s comments** *(Please provide a comment on the Candidate’s ability to perform the above core work task/s.)* | | | | | | | | | |
| **Scouting Team Leader’s Name** |  | | | | | | | | |
| **Scouting Team Leader’s Signature** |  | | | | | **Date** | |  | |

# SECTION C – Competency/Professional Conversation - Interview Questions

Candidate’s Instructions

This is a chance for the Assessor to draw out your actual individual experiences and relevant skills during a professional conversation. It is your opportunity to demonstrate competence, while referring to actual scenarios, tasks, and activities you have encountered and performed in the workplace.

Several questions are posed that relate to the elements of competency for each Unit of Competency. To prepare for the conversation with your Assessor, **write some dot point answers to the questions, together with a portfolio of your evidence (examples) that demonstrates your ability**. These will then be discussed in detail with your Assessor. You may draw upon a combination of your Scouting, professional and personal experiences.

Evidence/examples will need to be provided to the Assessor in the form of hard or electronic copy as they need to be assessed and uploaded into aXcelerate. The Assessment Instruments provide a guide to the evidence required to support the Candidate’s claim for RPL.

**Assessor’s Instructions**

This Tool Kit streamlines the RPL assessment process by taking a practical approach to RPL and increasing the use of on-site questioning and discussion. This will assist in developing a ‘picture of the Candidate’s skills and knowledge’. This picture can then be compared with industry standards enabling a determination of whether the Candidate had achieved the required outcomes.

Assessment involves judgement – this tool encourages the use of a professional competency conversation to maximise the Candidate’s opportunities to demonstrate competence. It is important to note however, that the professional conversation will not necessarily always be completed when carrying out RPL Assessment using this kit. It all depends on the level and provision of adequate evidence and as to whether an interview with questions to confirm competency is necessary.

The Performance and Knowledge Evidence is clearly described in the Assessment Requirements for each unit of competency. These are found at ‘training.gov.au’.

Ideally, all steps related to the assessment should be undertaken to provide the best opportunity for the Candidate to substantiate claims for RPL made, and for the Assessor to assess levels of competency appropriately, thus assisting decision making.

The RPL process is an efficient and considered process that does not rely solely on documentary evidence. It uses a combination of questioning, practical assessment and supporting evidence to provide evidence of the Candidate’s competence.

Not all RPL applications are the same and the level of allowance of RPL depends on the evidence provided, as well as the appropriate responses to questions, any practical assessment demonstrated, and any other evidence deemed necessary.

It is not intended that questions are asked for each competency or discussed during the conversation. Only questions related to those competencies that the initial documentary review has failed to fully address are required.

The Assessor may wish to use the key points from the Performance Criteria to formulate questions to suit the Candidate’s particular work situation and presented evidence. Above all, writing and asking your own questions should be seen as a task that will help to clarify and assist making a more appropriate and valid judgement as to competency, as well as being flexible in approach.

These questions will then be discussed in detail during your professional conversation with the Candidate. Candidates may draw upon a combination of their Scouting, professional and personal experiences.

On the following pages, place a tick (✓) in the ‘Yes’ or ‘No’ box next to each Element of Competency as it is addressed by the Candidate during the conversation. By doing this, you are recording what you have heard the Candidate say during the interview.

Use the *Additional notes from conversation* section at the end of each Unit of Competency to provide further details about the context of the discussion or other key points and examples the Candidate has discussed that may be relevant in confirming competency, including responses to any questions.

It is important to remember that the notes taken during the questioning interview are important evidence and should be retained as part of the Candidate’s assessment records. It is recommended that the interview be conducted in the workplace, allowing the Candidate access to documents, equipment etc. to support their statements.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Professional Conversation - Possible Interview Questions, Candidate’s Responses and Assessment**   | **Core unit of competency**  **HLTWHS001 Participate in work health and safety** | | --- |  |  |  |  |  | | --- | --- | --- | --- | | **Questions and Candidate’s Responses** | | **Assessor** | | | **Competency Achieved** | | | Explain how you plan and implement safe work practices |  | **Yes** | **No** | | Outline how you contribute to safe work practices in the workplace |  | **Yes** | **No** | | Describe how you have reflected on your own safe work practices |  | **Yes** | **No** |  Additional notes from conversation |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | **Core unit of competency**  **SISOFLD001 Assist in conducting recreation sessions** | | --- |  |  |  |  |  | | --- | --- | --- | --- | | **Questions and Candidate’s Responses** | | **Assessor** | | | **Competency Achieved** | | | Explain how you assist with preparing for an outdoor activity, including participants |  | **Yes** | **No** | | Describe how you have assisted with conducting the activity |  | **Yes** | **No** | | Outline what post activity actions are required |  | **Yes** | **No** |  Additional notes from conversation |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | **Core unit of competency**  **SISOFLD002 Minimise environmental impact** | | --- |  |  |  |  |  | | --- | --- | --- | --- | | **Questions and Candidate’s Responses** | | **Assessor** | | | **Competency Achieved** | | | Describe how you would determine environmental impacts of outdoor activities |  | **Yes** | **No** | | Explain how you could communicate minimal impact practices to participants |  | **Yes** | **No** | | How do you conduct activities with minimal impact? |  | **Yes** | **No** |  Additional notes from conversation |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| | **Core unit of competency**  **SISXIND002 Maintain sport, fitness and recreation knowledge** | | --- |  |  |  |  |  | | --- | --- | --- | --- | | **Questions and Candidate’s Responses** | | **Assessor** | | | **Competency Achieved** | | | Explain how you would develop and maintain sport, fitness and recreation knowledge |  | **Yes** | **No** | | What legal and ethical information is relevant to your outdoor activities? |  | **Yes** | **No** | | Outline how you could apply technology to your outdoor activities |  | **Yes** | **No** |  Additional notes from conversation |

# SECTION D - Third Party (Referee) Verification Report

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SISO30619 Certificate III in Outdoor Leadership** | | | | |
| **Candidate’s Name** |  | | | |
| **Referee’s Name**  *(Name of person providing this evidence)* |  | | | |
| **Position/Title** |  | | | |
| **Workplace** |  | | | |
| **Workplace Address** |  | | | |
| **Telephone Numbers** |  | | | |
| **Email Address** |  | | | |
| **This report was completed** | via Interview by Assessor | ❑ | Independently by Referee | ❑ |
| **Interview conducted by**  *(If applicable)* |  | | | |
| **Date of Interview** |  | | | |
| **Instructions** | Part of the assessment for the Candidate requires evidence from a Third Party (employer, supervisor or equivalent). This evidence will be used to validate the Candidate’s skills and experience.  A ‘letter of support’ may be provided from the organisation validating a range of tasks performed by the Candidate over a period is useful in identifying competence. | | | |

#### To Whom It May Concern

Re: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who is a \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*(Insert Candidate’s name)* *(Insert industry/job title).*

I certify that the above-named person has:

worked at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for a period of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Insert name of workplace) (Insert length of time*).

I have read the Candidates responses to the questions and confirm that they have regularly demonstrated, knowledge, skills, and attitudes to an acceptable workplace standard against the Core and selected Elective Units of Competency within this organisation.

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| I understand the evidence/tasks the Candidate has performed on which I am required to comment. | ❑ | ❑ |
| I am willing to be contacted if further verification of my statements is required. | ❑ | ❑ |

If you would like further information or would like to discuss any of the above, I can be contacted on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert phone number).*

Yours sincerely

Name (please PRINT): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# SECTION E – Assessment Instruments and Assessor’s Summary

**Third Party (Referee) Verification Report**

It is recommended that the Assessor verify the Third-Party Report (Section D) with the person who completes the form to confirm the Candidate’s skills in different contexts over time. This Report must be uploaded into aXcelerate.

**Assessment Instrument**

An Assessment Instrument, *Performance Evidence Check List,* is provided for each unit of competency as an example. The Assessor may develop their own assessment instruments as needed.

The attached Assessment Instruments (*Performance Evidence Check List*) provides a guide to the evidence sources to support the Candidate’s claim for RPL. The Candidate should be encouraged to provide any other evidence to the Assessor. If Candidates do not have all this evidence, they are not excluded from applying for recognition and should discuss options with the Assessor. All supporting evidence must be uploaded into aXcelerate by the Assessor.

**Assessment Summary**

The Assessor is to complete the Assessment Summary as a means of recording the Assessors decisions and ensuring that all the ‘Evidence Requirements’ from training.gov.au are collected from the Candidate. This Assessment Summary must be uploaded into aXcelerate.

**Assessment Instrument**

**Performance Evidence Check List**

**Unit of Competency: - HLTWHS001 Participate in work health and safety**

**Candidates Name:**

|  |  |  |
| --- | --- | --- |
| **Did the candidate do the following?** | **Yes** | **No** |
| Copy of an up-to-date activities log |  |  |
| Copy of Membership Profile (e.g., from Extranet or My Scout) |  |  |
| Copy of Reference (see Section D) |  |  |
| Demonstrated the knowledge evidence required by ‘training.gov.au’ through completing the RPL Tool Kit or by professional competency conversation |  |  |
| Demonstrated performance evidence as follows:   * Conducted a workplace risk assessment and recorded the results   + . * Contributed to a WHS meeting or inspection   + . |  |  |
| Completed RPL Tool Kit (if applicable) |  |  |
| Completed the appropriate ‘on demand’ learning modules |  |  |
| **Examples of evidence are attached** |  |  |

**Comments and observations:**

**Location/type of activity:**

**SAIT Assessor’s name:**

**Assessor Number:**

**Date:**

**Assessment Instrument**

**Performance Evidence Check List**

**Unit of Competency: - SISOFLD001 Assist in conducting recreation sessions**

**Candidates Name:**

|  |  |  |
| --- | --- | --- |
| **Did the candidate do the following?** | **Yes** | **No** |
| Copy of an up-to-date activities log |  |  |
| Copy of Membership Profile (e.g., from Extranet or My Scout) |  |  |
| Copy of Reference (see Section D) |  |  |
| Demonstrated the knowledge evidence required by ‘training.gov.au’ through completing the RPL Tool Kit or by professional competency conversation |  |  |
| Demonstrated performance evidence as follows:   * Evidence of assisting with setting up and delivery of three (3) outdoor Scouting activities for a group of participants   + .   + .   + . * Evidence of participating in a post activity debrief   + . * Evidence of how they have responded to three (3) participant problems involving non-compliance with activity rules, codes or safety procedures   + .   + .   + . * Evidence of how they have responded to three (3) different equipment faults that have arisen during the activity   + .   + .   + . |  |  |
| Completed RPL Tool Kit (if applicable) |  |  |
| Completed the appropriate ‘on demand’ learning modules |  |  |
| **Examples of evidence are attached** |  |  |

**Comments and observations:**

**Location/type of activity:**

**SAIT Assessor’s name:**

**Assessor Number:**

**Date:**

**Assessment Instrument**

**Performance Evidence Check List**

**Unit of Competency: - SISOFLD002 Minimise environmental impact**

**Candidates Name:**

|  |  |  |
| --- | --- | --- |
| **Did the candidate do the following?** | **Yes** | **No** |
| Copy of an up-to-date activities log |  |  |
| Copy of Membership Profile (e.g., from Extranet or My Scout) |  |  |
| Copy of Reference (see Section D) |  |  |
| Demonstrated the knowledge evidence required by ‘training.gov.au’ through completing the RPL Tool Kit or by professional competency conversation |  |  |
| Demonstrated performance evidence as follows:   * Copy of a written brief or report on potential causes and consequences of environmental damage as they relate to two (2) different types of outdoor Scouting activities   + .   + . * Evidence of interaction with different groups during the delivery of three (3) activities promoting environmental practices, that ensures compliance with organisational plans, practices and the Scouts Australia Environmental Charter   + .   + .   + . |  |  |
| Completed RPL Tool Kit (if applicable) |  |  |
| Completed the appropriate ‘on demand’ learning modules |  |  |
| **Examples of evidence are attached** |  |  |

**Comments and observations:**

**Location/type of activity:**

**SAIT Assessor’s name:**

**Assessor Number:**

**Date:**

**Assessment Instrument**

**Performance Evidence Check List**

**Unit of Competency: - SISXIND002 Maintain sport, fitness and recreation industry knowledge**

**Candidates Name:**

|  |  |  |
| --- | --- | --- |
| **Did the candidate do the following?** | **Yes** | **No** |
| Copy of an up-to-date activities log |  |  |
| Copy of Membership Profile (e.g., from Extranet or My Scout) |  |  |
| Copy of Reference (see Section D) |  |  |
| Demonstrated the knowledge evidence required by ‘training.gov.au’ through completing the RPL Tool Kit or by professional competency conversation |  |  |
| Demonstrated performance evidence as follows:   * Evidence that the participant has participated in four (4) separate opportunities to update on current information relating to outdoor activities related to Scouting, for example:   + Discussion with an Activity Guide.   + Attendance at activity training session.   + Completion of Stage 5 Outdoor Adventure Skills in all three (3) Core activity streams or equivalent.   + Completion of Stage 5 in one (1) additional activity stream or equivalent. |  |  |
| Completed RPL Tool Kit (if applicable) |  |  |
| Completed the appropriate ‘on demand’ learning modules |  |  |
| **Examples of evidence are attached** |  |  |

**Comments and observations:**

**Location/type of activity:**

**SAIT Assessor’s name:**

**Assessor Number:**

**Date:**

|  |  |
| --- | --- |
|  | Scouts Australia Institute of Training  RTO 5443  Assessment Summary  SIS20419 – Certificate II in Outdoor Recreation |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Candidate’s Name:** | | |  | | | | | | | | | |
| **Unit/s of Competency Assessed** | | | | | | | | | | **C or NYC** | | |
| **Core Units** | | | | | | | | | | | | |
| HLTWHS001 | | Participate in work health and safety | | | | | | | |  | | |
|  | |  | | | | | | | |  | | |
| SISOFLD002 | | Minimise environmental impact | | | | | | | |  | | |
|  | |  | | | | | | | |  | | |
| **Evidence used to assess the Candidate’s ability** (Please indicate) | | | | | | | | | | | | |
| CV (Work history) | | | |  | Unit/s specific Recognition Tool | | | | | | |  |
| Logbook of Experience | | | |  | Questioning / Professional Discussion | | | | | | |  |
| Photographs and/or Video | | | |  | Organisation Program / Activity Planning | | | | | | |  |
| Scenarios / Simulations | | | |  | Demonstration on the Job | | | | | | |  |
| Employer / Co-leader Testimonial | | | |  | Client Feedback / Evaluation Forms | | | | | | |  |
| Position description / Review | | | |  | Forms (development and/or implementation of) | | | | | | |  |
| Peer Discussion/ Evaluation | | | |  | Organisational Operating Procedures (Development and/or Implementation of) | | | | | | |  |
| Qualification(s) (retain in aXcelerate) | | | |  |  |
| Other (Provide details): | | | | | | | | | | | | |
| **Subject Matter Experts (SME)** | | | | | | | | **Organisation** | | | | |
| **SME** |  | | | | | | |  | | | | |
| **SME** |  | | | | | | |  | | | | |
| **Assessors Comments:** | | | | | | | | | | | | |
|  | **Lead Assessor** | | | | | **Moderating Assessor** (if applicable) | | | | | | |
| **Name:** |  | | | | |  | | | | | | |
| **Date:** |  | | | | |  | | | | | | |
| **Assessor No.** |  | | | | |  | | | | | | |
| **Signature:** |  | | | | |  | | | | | | |
| **If assessment result is Not Yet Competent (NYC), the Candidate has been provided with:** | | | | | | | | | | | | |
| Information about additional assessments or evidence requirements | | | | | | | | | | |  | |
| Learning pathways they could access to gain further skills and knowledge | | | | | | | | | | |  | |
| **Candidate’s Statement of Acceptance for Not Yet Competent Outcome** | | | | | | | | | | | | |
| I accept the assessment decision and agree that the process was valid and fair. | | | | | | | | | | |  | |
| **OR** I wish to appeal the assessment decision. | | | | | | | | | | |  | |
| **Candidate’s Signature:** |  | | | | | | **Date:** | |  | | | |