|  |  |  |  |
| --- | --- | --- | --- |
| Candidate: | Click to add candidate name | Assessor: | Click to add assessor name |
| IMCA role: | Click to add IMCA role | | |
| Competence ID: | Click to add competence ID(s) | | |
| Vessel/ Installation: | Click to add vessel/installation name | Date: | Click to add date |
| The following is a record of questioning to demonstrate the candidate’s knowledge and understanding of the competence task: | | | |
| Brief description of the task | | | |
| Click to add brief description of the task(s) | | | |
| Click to add question | | | |
| Click to add candidate response | | | |
| Click to add question | | | |
| Click to add candidate response | | | |
| Click to add question | | | |
| Click to add candidate response | | | |
| Click to add question | | | |
| Click to add candidate response | | | |
| Feedback | | | |
| Click to add candidate response | | | |
| I, the Candidate, agree that the above record is a true reflection of the questioning session that took place | | | |
| Candidate: | Click to add candidate name | Date: | Click to add date |
| I, the Assessor, confirm that the Candidate **Assessor to choose item** demonstrated competence in the knowledge and understanding of the task in question | | | |
| Assessor: | Click to add assessor name | Date: | Click to add date |
| Assessor Role: | Click to add assessor role | Assessor Company: | Click to add assessor company name |