|  |  |
| --- | --- |
| **Name:** |  |
| **Date:** |  |
| **TASK:** | **Air Compressor** | **Stage of stages in task** |
| TA: |  |
| **Name of Assessor:** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| A Skill level of**...A...B...C...D...E...**Indicate level using underpinning work skill guide**Steps requiring skill level : List by step number**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |

**Office use only** |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Assistance coding:**0=no assistance/fully independent1=indirect verbal prompts/instructions2=gestural prompts3=direct verbal prompts/instructions4=model style prompting5=physical prompting MINIMAL6=physical prompting FULL assistance7=not complaint/failed taskN/A=not applicable  | OBSERVATION DATES  | Associated: * Safe Work Procedure

OHS requirements* Safety Glasses
* Gloves - tech/riggers
* Ear muffs
* Steel capped boots
* Work clothing
* Face mask
* Sun protection
 |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | **Staff initials**: |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | STEPS  | ASSISTANCE REQURED |
| **1** | Use of OHS requirements |  |  |  |  |  |  |  |  |  |  |  |  |  | SUPERVISOR:* Pre – safety checks
 |
| **2** | *2 stroke starting procedure GRF-23* |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **3** | Using correct attachments |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **4** | Blowing out filters thoroughly  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **5** | Using air compressor to pump tyres correctly |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **6** | Roll up lead and hose when finished |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **7** | Safety awareness of workers nearby |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Comments:**

|  |
| --- |
|  |