

Name of Assessed Person:

Registration:

UNIT MEAAVI0038: Use Electronic Test Equipment

1. Select Required Test Equipment	a. Electronic Multimeters	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
	b. Phase-Angle Voltmeters. (may be omitted where not applicable to enterprise)	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
	c. Oscilloscopes (Dual Differential, Differential, Delayed Time Base, Storage)	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
	d. Current Probes	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No

Performance Criteria:

- 1.1 Identify system or component test requirements from maintenance documentation.
- 1.2 Select appropriate test equipment based on test requirements.

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1. Cont'd Select Required Test Equipment	e. Logic and Discrete Component Testers	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
	f. Electronic Component Substitution Boxes and Miscellaneous Test Adapters	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No

Performance Criteria:

- 1.1 Identify system or component test requirements from maintenance documentation.
- 1.2 Select appropriate test equipment based on test requirements.

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2. Prepare Test Equipment for Use	a. Electronic Multimeters	No. of Entries	1	2	3	
		Tail / Job No.				
		LAME Sign.				
		Date				
		Simulated	Yes No	Yes No	Yes No	
	b. Phase-Angle Voltmeters. (may be omitted where not applicable to enterprise)	No. of Entries	1	2	3	
		Tail / Job No.				
		LAME Sign.				
		Date				
		Simulated	Yes No	Yes No	Yes No	
	c. Oscilloscopes (Dual Differential, Differential, Delayed Time Base, Storage)	No. of Entries	1	2	3	
		Tail / Job No.				
		LAME Sign.				
		Date				
		Simulated	Yes No	Yes No	Yes No	
	d. Current Probes	No. of Entries	1	2	3	
		Tail / Job No.				
		LAME Sign.				
		Date				
		Simulated	Yes No	Yes No	Yes No	
Performance Criteria:						
2.1 Check test equipment for serviceability, and fit required leads in accordance with maintenance documentation.						
2.2 Select required function and range of measurement in accordance with maintenance manual.						

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2. Cont'd Prepare Test Equipment for Use	e. Logic and Discrete Component Testers	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
	f. Electronic Component Substitution Boxes and Miscellaneous Test Adapters	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No

Performance Criteria:

- 2.1 Check test equipment for serviceability, and fit required leads in accordance with maintenance documentation.
- 2.2 Select required function and range of measurement in accordance with maintenance manual.

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3. Test System or Component	a. Electronic Multimeters	No. of Entries	1	2	3		
		Tail / Job No.					
		LAME Sign.					
		Date					
		Simulated	Yes	No	Yes	No	Yes
	b. Phase-Angle Voltmeters. (may be omitted where not applicable to enterprise)	No. of Entries	1	2	3		
		Tail / Job No.					
		LAME Sign.					
		Date					
		Simulated	Yes	No	Yes	No	Yes
	c. Oscilloscopes (Dual Differential, Differential, Delayed Time Base, Storage)	No. of Entries	1	2	3		
		Tail / Job No.					
		LAME Sign.					
		Date					
		Simulated	Yes	No	Yes	No	Yes
	d. Current Probes	No. of Entries	1	2	3		
		Tail / Job No.					
		LAME Sign.					
		Date					
		Simulated	Yes	No	Yes	No	Yes
Performance Criteria:							
3.1 Determine test points and polarity for measurement or testing from test system manual and maintenance manual.							
3.2 Measure required electronic circuit parameters with test equipment in accordance with maintenance documentation while observing all relevant work health and safety (WHS) requirements.							

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3. Cont'd Test System or Component	e. Logic and Discrete Component Testers	No. of Entries	1	2	3
		Tail / Job No.			
		LAME Sign.			
		Date			
		Simulated	Yes No	Yes No	Yes No
f. Electronic Component Substitution Boxes and Miscellaneous Test Adapters	No. of Entries	1	2	3	
	Tail / Job No.				
	LAME Sign.				
	Date				
	Simulated	Yes No	Yes No	Yes No	

Performance Criteria:

- 3.1 Determine test points and polarity for measurement or testing from test system manual and maintenance manual.
- 3.2 Measure required electronic circuit parameters with test equipment in accordance with maintenance documentation while observing all relevant work health and safety (WHS) requirements.

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Certification of Underpinning Knowledge and Skills to Use Electronic Test Equipment

A person cannot be assessed as competent until it can be demonstrated to the satisfaction of the workplace assessor that the relevant elements and performance criteria of the unit of competency are being achieved under routine supervision with each item of test equipment having been used to measure electronic circuit parameters and test performance of a) to f). **(Group b may be omitted where they are not Applicable to the Enterprise)** in the range statement and at least one major component for each listed system type. This shall be established via the records in the Journal of Experience or, where appropriate, an equivalent Industry Evidence Guide.

UNIT MEAAVI0038: Use Electronic Test Equipment	
<p>Evidence has been confirmed of the attainment of the following pre-requisite units of competency (as they are related to attainment of the elements of competency specified in this unit).</p> <p style="text-align: center;">107, 154, 155, 156, 157, 158</p>	
<p>Evidence has been confirmed of the knowledge requirements for this unit as delivered by a CASR 147 Approved Organisation.</p> <p style="text-align: center;">OR</p> <p>Assessment has been conducted to determine that the underpinning knowledge and skills have been achieved in accordance with the Competency Unit.</p>	

Certification of Unit Completion

I certify that I have reviewed the certification of the elements for this competency unit and that all of the competency unit requirements have been met.

Signed: _____ Assessor No. _____ MTO: _____ Date: _____

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