| | Trade Unit Certification Sheets | AA TT PRO 01a | | | | | | | |
|--------------------------|-----------------------------------|------------------|--|--|--|--|--|--|--|
| Name of Assessed Person: | of Assessed Person: Registration: | | | | | | | | |
| | | | | | | | | | |

| UNIT MEAMEC0053: Perform | borescope inspections | | | | | <u>,</u> | | |
|----------------------------------|--|----------------|-----|----|-----|----------|-----|----|
| | | No. of Entries | - | _ | 4 | 2 | : | 3 |
| 1 | a. Perform a representative range of the borescope inspection tasks performed within the enterprise. | Tail / Job No. | | | | | | |
| 1. Set un horoscono equinment | | LAME Sign. | | | | | | |
| Set up borescope equipment | | Date | | | | | | |
| | | Simulated | Yes | No | Yes | No | Yes | No |
| Performance Criteria: | | | | | | | | |
| | able borescope equipment for use. equipment for correct operation. | | | | | | | |

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|--------------------------|---------------------------------|------------------|--|--|--|
| Name of Assessed Person: | erson: Registration: | | | | |

| | | No. of Entries | 1 | L | 2 | 2 | | 3 |
|------------------------------------|--|----------------|-----|----|-----|----|-----|----|
| 2 | Deuferum e verseenteting versee of the beverse in spection tools | Tail / Job No. | | | | | | |
| 2. Perform borescope inspection | performed within the enterprise. | LAME Sign. | | | | | | |
| | | Date | | | | | | |
| | | Simulated | Yes | No | Yes | No | Yes | No |
| Performance Criteria: | e for safe borescope inspection in accordance with applicable maintenance | 4242 | | | | | | |
| | nce with applicable maintenance data or standard operating procedures. | Jala. | | | | | | |

| | Trade Unit Certification Sheets | AA TT PRO 01a |
|--------------------------|---------------------------------|------------------|
| Name of Assessed Person: | Registration | 1: |

| | | Tail / Job No. | | | | | | |
|---|--|----------------|-----|----|-----|----|-----|----|
| 3. Record and assess borescope inspection results | a. Perform a representative range of the borescope inspection tasks performed within the enterprise. | LAME Sign. | | | | | | |
| | | Date | | | | | | |
| | | Simulated | Yes | No | Yes | No | Yes | No |
| erformance Criteria: | | | | | | | | |

| | Trade Unit Certification Sheets | AA TT PRO 01a |
|--------------------------|---------------------------------|------------------|
| Name of Assessed Person: | Registration | 1: |

| | | | No. of Entries | 1 | 1 | 2 | 2 | | 3 |
|---|----|---|----------------|-----|----|-----|----|-----|----|
| 4. | | Deuferme a very sector to the beverse in a settion to be | Tail / Job No. | | | | | | |
| Maintain and re-pack borescope equipment for | a. | Perform a representative range of the borescope inspection tasks performed within the enterprise. | LAME Sign. | | | | | | |
| storage | | performed within the enterprise. | Date | | | | | | |
| storage | | | Simulated | Yes | No | Yes | No | Yes | No |
| Performance Criteria: | | | | | | | | | |
| | | rescope equipment in accordance with manufacturer's instructions. nsport or storage containers and store in accordance with standard e | | | | | | | |

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|---------|---------------------------------|------------------|
| • - | | |

Registration:

Certification of Underpinning Knowledge and Skills to Perform borescope inspections

A person cannot be assessed as competent until it can be demonstrated to the satisfaction of the workplace assessor that the relevant elements of this unit of competency are being achieved under routine supervision on a representative range of the borescope inspection tasks performed within the enterprise. This shall be established via the records in the Log of Industrial Experience and Achievement or, where appropriate, an equivalent Industry Evidence Guide (for details refer to the Companion Volume Implementation Guide).

| UNIT MEAMEC0053: Perform borescope inspections | |
|--|--|
| 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). | |
| NIL | |
| Evidence has been confirmed of the knowledge requirements for this unit as delivered by a CASR 147 Approved Organisation. | |
| OR | |
| Assessment has been conducted to determine that the underpinning knowledge and skills have been achieved in accordance with the Competency Unit. | |

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. | N | ITO: | | Date: | |
|---|--------------|------------|------|------|-------|--------------|
| | | | | | | |
| Approved by: Technical Training Manager | Ur | 01/12/2023 | | R: 3 | | Page: 5 of 6 |

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|------|---------------------------------------|--|---------------------------------|------------------|--|
| Name | Name of Assessed Person: Registration | | | | |

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