

**NOTES**

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**SUPERVISOR SIGN OFF**

I, \_\_\_\_\_ certify that: \_\_\_\_\_ has undertaken the required hours of practical operation recorded in this Log Book and is ready for assessment for VOC for the following types of plant:

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DATE: \_\_\_\_\_ SUPERVISOR'S SIGNATURE: \_\_\_\_\_

**TRAINEE OPERATOR LOG BOOK**

*This Log Book has been issued for the purpose of gathering evidence of practical operation of plant for Verification of Competency (VOC) Assessment.*

Trainee Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone: \_\_\_\_\_

Trainee's Signature: \_\_\_\_\_

**EMPLOYER DETAILS**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_

**DETAILS OF SUPERVISORS**

NAME	CONTACT PHONE	CERT/LICENCE No
_____	_____	_____

*At least 50 hours practical operation of the equipment must be recorded in this Log Book before assessment. When ready for VOC Assessment:*

Contact Bluetron Pty Ltd  
PO Box 770 GUNGAHLIN ACT 2912 Phone: 02 6262 2557

**Bluetron**  "Your partner in Workplace Safety"

Date	Name of Supervisor	Certificate No of Supervisor	Type of Plant Used

Types of Work Performed	Hours	Supervisor Signature

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