|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Qualifications and training—briefer/guide** | | | | |
| Staff member’s name: | | | | |
| Address: | | Telephone: | | |
|  | | Mobile: | | |
| Date of commencement of employment: | | | | |
| Role/s | Briefer | Guide | | Both |
| Qualifications: | | | | |
| Experience: | | | | |
| Has provided proof of at least one year experience as a master of a sailing vessel over 12 metres since gaining Master class 5 qualification? | | | Yes | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Observe 10 safety briefings** | | | | | |
| Number | Date | Supervisor’s name | Number | Date | Supervisor’s name |
| 1 |  |  | 6 |  |  |
| 2 |  |  | 7 |  |  |
| 3 |  |  | 8 |  |  |
| 4 |  |  | 9 |  |  |
| 5 |  |  | 10 |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Deliver 5 safety briefings and guide practical experience under supervision** | | | | | | |
| Safety briefings delivered | | | Acted as guide | | | |
| Number | Date | Supervisor’s name | | Number | Date | Supervisor’s name | |
| 1 |  |  | | 1 |  |  | |
| 2 |  |  | | 2 |  |  | |
| 3 |  |  | | 3 |  |  | |
| 4 |  |  | | 4 |  |  | |
| 5 |  |  | | 5 |  |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Vessel owner and staff member sign off** | | | |
|  | Name | Signature | Date | |
| Vessel owner: |  |  |  | |
| Staff member: |  |  |  | |