



Application Criteria for a MARCSTA Training Provider Licence Conduct Local Risk Control – RIIRIS201A

Address each of the criteria listed below and attach all evidence to support statements related to the criteria.

Essential Requirements:

1. Successful completion of a Certificate IV in Training and Assessment.
 - **ORIGINAL CERTIFICATES MUST BE SIGHTED OR CERTIFIED COPIES SUPPLIED.**
2. A minimum of three (3) years full time workplace safety training experience as a safety trainer or training professional in at least one of the following industry mining and/or construction industry.
OR
Equivalent demonstrated experience facilitating Risk Assessment workshops relating to workplace safety.

Evidence for the above must be documented on a fully detailed current resumé.

Key Elements:

- Workplace training experience within the mining, civil contracting and or construction industry.
 - Safety related training experience.
3. Knowledge of and experience in the last three (3) years in the application of risk identification, assessment and management principles.
 4. Demonstrated expertise in the understanding and delivery of the MARCSTA course content and the ability to contextualise and apply the course material.
 5. A working knowledge of the relevant state legislation (Occupational Safety and Health Act.)

Key Elements:

- Duty of care;
- Personal protective equipment;
- Hazard identification, assessment and control;
- Manual handling.

6. Written references from at least two current industry nominees.

Key Elements:

- Current and relevant written references must include an assessment of the ability of the applicant to become a licensed training provider to deliver risk assessment training.

7. Demonstrated experience in assessing competency based training (CBT).

Key Elements:

- Principles of CBT;
- Principles of assessment;
- Assessment criteria;
- Methods of assessment;
- Purpose of assessment.

8. A personal statement outlining the reasons for making application for the training provider licence.

Key Element:

- Hand written - minimum one page.

9. A current First Aid Certificate.

Key element:

- Senior First Aid Certificate undertaken within the last three (3) years.

10. Details of the location of delivery of the program including training facilities and training aids to be used for program delivery

Key element:

- Should your application be successful MARCSTA would inspect the facilities prior to the commencement of delivery

All applicants are required to appear before a multi-disciplinary accreditation panel to present a component of the MARCSTA Conduct Local Risk Control Training

Particular emphasis will be placed on the applicant's ability to address criteria 4 and 7 utilising current Adult Learning Concepts.

Successful applicants will be required to undergo orientation at MARCSTA's administrative office prior to commencing program delivery.

Training Provider Licence Application

NAME OF APPLICANT _____

BUSINESS NAME _____

ABN _____

BUSINESS ADDRESS _____

BUSINESS PHONE _____ FAX _____

MOBILE _____

EMAIL ADDRESS _____

WEB ADDRESS _____

HOME ADDRESS _____

HOME PHONE _____ FAX _____

INTENDED LOCATION OF TRAINING _____

APPLYING FOR

Conduct Local Risk Control

SIGNATURE _____

DATE _____

Send to:

**MARCSTA, Suite 5, Petroleum House, 12 Brodie Hall Drive, Technology Park, Bentley WA 6102
Tel: (08) 9355 1400 Fax: (08) 935 1499 Email: safety@marcsta.com**