

FOR OFFICE USE ONLY:

☐ Results emailed to student (Staff init _____ Date _____) ☐ Results entered in database (Staff init _____ Date _____)

LEARNER ASSESSMENT BOOKLET

COVER SHEET

Risk Management

Unit of Competency: BSBRSK401 Identify risk and apply risk management processes

CANDIDATE to complete this section

Name (Print): Alex Achille

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Contact Phone Number 0434490111

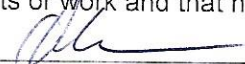
Trainer name:

Date submitted (1) 12/5/16

Date
resubmitted (2)

Date
resubmitted (3)

Candidate declaration—By signing/ initialing below, I declare that no part of this assessment has been copied from another person's work with the exception of where I have listed or referenced documents or work and that no part of this assessment has been written for me by another person.

Signed: 

Date:

ASSESSOR to complete this section

	RESULT IN EACH ASSESSMENT ITEM			Comments
	Satisfactory	Unsatisfactory	Did not submit	
Assessment 1				
Assessment 2				
Assessment 3				
Assessment 4				
Assessment 5				
Assessment 6				

ASSESSOR to complete this section

Name of Assessor:

Signature of Assessor:

Overall Results C NYC

Date portfolio
review completed: