

Candidate Details

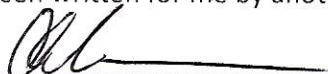
Assessment – HLTWHS001: Participate in workplace health and safety.

Please complete the following activities and hand in to your trainer for marking. This forms part of your assessment for HLTWHS001: Participate in workplace health and safety.

Name: Alex Achille
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Email: alexachille@live.com.au
Employer: ~

Declaration

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: 7/4/16

If activities have been completed as part of a small group or in pairs, details of the learners involved should be provided below;

This activity workbook has been completed by the following persons and we acknowledge that it was a fair team effort where everyone contributed equally to the work completed. We declare that no part of this assessment has been copied from another person's work with the exception of where we have listed or referenced documents or work and that no part of this assessment has been written for us by another person.

Learner 1: _____
Signed: _____
Learner 2: _____
Signed: _____
Learner 3: _____
Signed: _____