

### **Third Party Reports**

The Third Party Report should be completed by a senior member of staff i.e. a supervisor or manager, where possible. The report should cover the points below, with a description to show that the tasks have been witnessed over time, while working with the learner. Examples, times, dates etc. should be included, if possible.

As this unit is about producing spreadsheets, you will need to have witnessed the learner within a working or training environment:

1. Selecting and preparing resources
2. Planning spreadsheet design
3. Creating spreadsheet
4. Producing simple charts
5. Finalising spreadsheets.

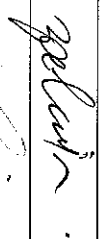
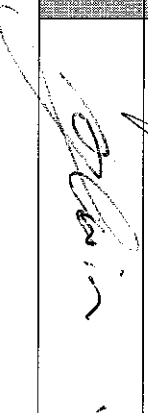
Ticking yes/no next to the tasks is required, as well as an accompanying report.

### Third Party Checklist

|                                                                                                                                                                                                        |                                |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|----|
| Candidate's Name                                                                                                                                                                                       | Zoe Lwin                       |    |
| Assessor or Observer's Name                                                                                                                                                                            | Simon Lwin                     |    |
| Unit of Competence<br>(Code and Title)                                                                                                                                                                 | BSBITU304 Produce Spreadsheets |    |
| Date of Assessment                                                                                                                                                                                     | 25/6/2017                      |    |
| Location                                                                                                                                                                                               |                                |    |
| Demonstration Tasks                                                                                                                                                                                    |                                |    |
| Materials and Equipment                                                                                                                                                                                |                                |    |
| Tasks to be simulated if not witnessed over time:                                                                                                                                                      |                                |    |
| 1. Did the learner adhere to ergonomic, work organisation and occupational health and safety requirements?                                                                                             | Yes                            | No |
| 2. Did the learner use energy and resource conservation techniques to minimise wastage?                                                                                                                | ✓                              |    |
| 3. Did the learner identify spreadsheet task requirements in relation to data entry, storage, output and presentation?                                                                                 | ✓                              |    |
| 4. Did the learner ensure spreadsheet design suits purpose, audience and information requirements of task?                                                                                             | ✓                              |    |
| 5. Did the learner ensure spreadsheet design enhances readability and appearance, and meets organisational and task requirements for style and layout?                                                 | ✓                              |    |
| 6. Did the learner use style sheets and automatic functions to ensure consistency of design and layout?                                                                                                | ✓                              |    |
| 7. Did the learner ensure data is entered, checked and amended to maintain consistency of design and layout, in accordance with organisational and task requirements?                                  | ✓                              |    |
| 8. Did the learner format spreadsheet using software functions to adjust page and cell layout to meet information requirements, in accordance with organisational style and presentation requirements? | ✓                              |    |
| 9. Did the learner ensure formulae are tested and used to confirm output meets task requirements, in consultation with appropriate personnel as required?                                              | ✓                              |    |
| 10. Did the learner use manuals, user documentation and online help to overcome problems with spreadsheet design and production?                                                                       | ✓                              |    |

|                                                                                                                                                       |                  |                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------|
| 11. Did the learner select chart type and design that enables valid representation of numerical data, and meets organisational and task requirements? | ✓                |                |
| 12. Did the learner create charts using appropriate data range in spreadsheet?                                                                        | ✓                |                |
| 13. Did the learner modify chart type and layout using formatting features?                                                                           | ✓                |                |
| 14. Did the learner preview, adjust and print spreadsheet and any accompanying charts, in accordance with task requirements?                          | ✓                |                |
| 15. Did the learner ensure data input meets designated timelines and organisational requirements for speed and accuracy?                              | ✓                |                |
| 16. Did the learner name and store spreadsheet in accordance with organisational requirements and exit application without data loss/damage?          | ✓                |                |
| The candidate's performance was:                                                                                                                      | Not Satisfactory | ✓ Satisfactory |

Further comments:

|                               |                                                                                   |
|-------------------------------|-----------------------------------------------------------------------------------|
| Candidate's Signature         |  |
| Assessor/Observer's Signature |  |

### Third Party Evidence

| Confidential Information |                                |
|--------------------------|--------------------------------|
| Name of Candidate:       | Zoe Lwin                       |
| RIO: CSTC                |                                |
| Unit(s) of Competence:   | BSBITU304 Produce Spreadsheets |

As part of the assessment for the units of competency, we are seeking evidence to support a judgment about the candidate's competence. As part of the evidence of competence we are seeking reports from the supervisor and other people who work closely with the candidate.

|                         |                                     |
|-------------------------|-------------------------------------|
| Name of the supervisor: | Simon Lwin                          |
| Workplace:              | Lwin Cleaning                       |
| Address:                | 79 Waterview Avenue, Wynnunum, 4178 |
| Phone:                  |                                     |

Do you understand which evidence/tasks the candidate has provided/performed that you are required to comment on? Yes No

As the assessor explains the purpose of the candidates assessment? Yes No

Are you aware that the candidate will see a copy of this form? Yes No

Are you willing to be contacted should further verification of this statement be required? Yes No

|                                                                                                                                             |                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| What is your relationship to the candidate?                                                                                                 | Boss                                                                                            |
| How long have you worked with the person being assessed?                                                                                    | 2 Years                                                                                         |
| How closely do you work with the candidate in the area being assessed?                                                                      | Same Office                                                                                     |
| What is your technical experience and/or qualification (s) in the area being assessed? (include any assessment or training qualifications.) | Owner/Operator Lwins Cleaning, Flood Damage Restoration Technician, Carpet Cleaning Technician. |

**Does the candidate:**

|                                          |                                         |                             |
|------------------------------------------|-----------------------------------------|-----------------------------|
| Perform tasks to the industry standards? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Managed job tasks effectively?           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Implement safe working practices?        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Solve problems on the job?               | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Work well with others?                   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Add that to new tasks?                   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| With unusual or non-routine situations?  | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

| Overall do you believe the candidate conforms to the standard required by the unit of competency on a consistent basis? | Yes |
|-------------------------------------------------------------------------------------------------------------------------|-----|
| Identify any training needs for the candidate:                                                                          |     |
|                                                                                                                         |     |

**Any other comments:**