**Form J1.1**

***Office Use***

**Ref.:**

**1. General Information:**

|  |  |  |
| --- | --- | --- |
| **Surname:** | **First Names:** | **PHOTOGRAPH***(Passport-type.* *Please paste - do not staple)**Alternatively, insert electronically in JPEG or similar format* |
| **Date of Birth:** | **Identity No:** *Or* **Passport No.****and Country:** |
| **\*Race Group:**Please tick theapplicable block | **Asian** | **Black** | **Gender**Please tick theapplicable block) | **Male** | **Country of normal residence:** |
| **Coloured**  | **White** | **Female** |
| **Indian** |  | **Other** |
| **Residential Address:****Street Number:****Street Name****City/District:****Province:****Country:****Zip Code/ Postal Code:** | **Postal Address:****Postal Box****City/District:****Province:****Country:****Zip Code/ Postal Code:** | **Employer Name & Address:****Employer:****Street Number:****Street Name:****City/District:****Province:****Country:****Zip Code/ Postal Code:** |
| **Tel. No. (Home):****Tel. No. (Work): (***include area codes)***Cell No.:** **E-mail:**  | **Title of Position held:** | **Tel. No. (Employer):** **Fax No.: (**include area codes)**E-mail:** |

\* Completion of this section is necessary in order to accurately reflect equity statistics in terms of Employment Equity Act, No 55 of 1998.

**2. Qualifications:** (Highest Level obtained per field)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Educational Institution** | **Qualification** | **Attendance****from to** | **Date of final****examination** | ***Office******use*** |
|  |  |  |  |  |
|  |  |  |  |  |
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|  |
| --- |
| **NB:** Kindly initial this page in the presence of a Commissioner of Oaths / Justice of Peace. **Commissioner of Oaths/****Applicant: …………………………. Justice Of Peace: ………………………………………** |

**Form J1.2**

**3. Did you complete an Apprenticeship / Learnership: Yes No**

|  |  |  |
| --- | --- | --- |
| **Trade:**  | **Date from:**  | **Date to:**  |

**4. Previous Registration Details:**

|  |  |  |
| --- | --- | --- |
| **Category** | **Registration Number** | **Date Cancelled** |
| **Reg LMI** |  |  |

**5. Membership of Voluntary Associations recognised in terms of the Act** (See list): (Membership of Engineering Associations/Institutes/Societies not recognised may also be included. If more space is needed, please supply information separately.)

|  |  |
| --- | --- |
| **Name of Association / Institute / Society** | **Membership grade and date of admission** |
|  |  |
|  |  |

**6. Application Fee / Outstanding Arrear Annual Fee:** (**Fees are available on ECSA website under the tab Annual Fees) Please note: Only electronic payment will be accepted, please attach proof of payment**

|  |
| --- |
| 1. My Application fee of **R \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** is transferred electronically. |
| 2. The outstanding, arrear annual fee of **R \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**is also transferred electronically. (The outstanding, arrear annual fee may be confirmed in consultation with ECSA.) |

**7. Referees:** (***Provide name and contact details****)*

|  |
| --- |
| (1)E-mail:Tel no: |

|  |
| --- |
| **NB:** Kindly initial this page in the presence of a Commissioner of Oaths / Justice of Peace. **Commissioner of Oaths/****Applicant: …………………………. Justice Of Peace:……………………..** |

|  |  |
| --- | --- |
|  **Office Use Only**Application fee: R \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | *(Council’s stamp)* |

**Note:** Voluntary Associations List is available on the ECSA website or [**http://www.ecsa.co.za**](http://www.ecsa.co.za)

**8. Declaration:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(full names)ID No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby in application to ECSA * I lawfully declareto abide by all the provisions of the **Engineering Profession Act, 2000 (Act No. 46 of 2000)** and any **Rules** published thereunder, including the **Code of Professional Conduct**.

Now therefore I further declare explicitly to the following:

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Description** | **Yes** | **No** |
| **i.** | *That I have never been removed from an office of trust on account of improper conduct;* |  |  |
| **ii.** | *I have never been convicted of an offence in the Republic, other than an offence committed prior to 27 April 1994 associated with political objectives, and was sentenced to imprisonment without an option of a fine, or, in the case of fraud, to a fine or imprisonment or both;* |  |  |
| **iii.** | *I have never been convicted of an offence in a foreign country and sentenced to imprisonment without an option of a fine, or, in the case of fraud, to a fine or imprisonment or both* |  |  |
| **iv** | *I have never been declared by the High Court to be of unsound mind or mentally disordered, or is detained under the Mental Health Act, 1973;* |  |  |
| **v** | *That I have never been disqualified from registration as a result of any punishment imposed on me under this Act* |  |  |
| **vi** | *I have never been declared rehabilitated insolvent whose insolvency was caused by my negligence or incompetence in performing work falling within the scope of my registration(s).*  |  |  |

I am cognisant of the fact that should the provisions referred to above as depicted under Section 19(3)(a) of the ACT be contrary, Council may refuse my application. I solemnly declare that, to the best of my knowledge, all the information contained in my application is true and correct.Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_I hereby certify that the Applicant has acknowledged that he/she knows and understands the contents of this declaration which was sworn to and signed before me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_on this...........day of.............................**2018,** the regulations contained in Government Notice No. R1258 dated 21st July 1974, as amended, having been complied with.**Commissioner of Oaths/ Justice of Peace:** ……………….……………………………**PRINT NAME** ……………….……………………………**SIGNATURE** *(Commissioner’s stamp)* |

**Form J2.1**

**EXPERIENCE REPORT RE-REGISTERED LIFTING MACHINERY INSPECTORS**

**Surname and Initials:**

Specific equipment type applicable to this period:

(e.g. Lifting tackle, Chain blocks and lever hoists, Fork lifts, Mobile cranes, Overhead and gantry cranes, Tower cranes, Ships cranes, Wharf side cranes, Reach stackers, Straddle carriers, Container cranes, Arial platforms, Suspended access platforms, Industrial lifting devices, Under the hook non-fixed attachment, Tail lifters, Vehicle hoists, Other categories.)

Consult the Information Sheet (Sheet J2) before completing this report.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Period No:** | **Date from:** **to:** | **Your Title or Function:** | **No. of months:** |  |
| **Employer’s Name and address:** |
| **Supervisor’s Name, Title of Position held and address:****ECSA Registration No:** | **Supervisor’s****Signature:****Date:** |
| **(Please do not exceed 200 words per period)** |

**Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Form J2.2**

**RESUMé OF WORK PERFORMED DURING PERIOD OF CANCELLATION OF REGISTRATION**

**Surname and Initials:**

Specific equipment type applicable to your registration:

(e.g. Lifting tackle, Chain blocks and lever hoists, Fork lifts, Mobile cranes, Overhead and gantry cranes, Tower cranes, Ships cranes, Wharf side cranes, Reach stackers, Straddle carriers, Container cranes, Arial platforms, Suspended access platforms, Industrial lifting devices, Under the hook non-fixed attachment, Tail lifters, Vehicle hoists, Other categories.)

First complete a Form J2.1 for each period.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Period No:** | **Dates** (inclusive)**From: To:** | Number of**years and months** | Employer | **Post held** | **Subject and type of work** |
|
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Total years, months:** |  |

**Signature of Applicant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Registered members applying for re-registration with the Council need to provide proof that they complied with the CPD requirements and have obtained at least three (3) CPD credits in Category 1: Developmental Activities prior to becoming reregistered. Such CPD credits must have been obtained during the twelve (12) months preceding the application.

**Form J2.6**

**RECORD OF INSPECTION AND LOAD TESTS CARRIED OUT OVER A PERIOD OF CANCELLATION OF REGISTRATION**

**Surname and Initials:**

Specific equipment type applicable to your registration:

(e.g. Lifting tackle, Chain blocks and lever hoists, Fork lifts, Mobile cranes, Overhead and gantry cranes, Tower cranes, Ships cranes, Wharf side cranes, Reach stackers, Straddle carriers, Container cranes, Arial platforms, Suspended access platforms, Industrial lifting devices, Under the hook non-fixed attachment, Tail lifters, Vehicle hoists, Other categories.)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Load Test No:** | **Dates (**inclusive)**From: To:** | **Specific Equipment Load Tested** | Owner of Lifting Machine Tested | Serial Number of Lifting Machine Tested | Load Applied | **Deflection,****if applicable** | **Final Result of Inspection and Load Test** |
| **1** |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |

**Signature of Applicant:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Mentor / Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of Mentor/Supervisor printed: Tel. No.:**

**Form J2.4**

# Major Inspection and Load Test Report

**IMPORTANT NOTE: Use this form to report in maximum 100 words per item on a major inspection and load test task carried out by you. THE ACTUAL WORK SCHEDULE AND LOAD TEST REPORT MUST BE ATTACHED TO THIS REPORT FOR EACH SPECIFIC EQUIPMENT TYPE APPLIED FOR. Some items in this report carry more weight than others, as indicated by the percentages stated.**

**Name:**

Specific equipment type applicable to your registration:

(e.g. Lifting tackle, Chain blocks and lever hoists, Fork lifts, Mobile cranes, Overhead and gantry cranes, Tower cranes, Ships cranes, Wharf side cranes, Reach stackers, Straddle carriers, Container cranes, Arial platforms, Suspended access platforms, Industrial lifting devices, Under the hook non-fixed attachment, Tail lifters, Vehicle hoists, Other categories.)

|  |  |
| --- | --- |
| **Task name and dates:** |  |
| **1. Define Task, Interpret and Investigate:** |  |
| 1.1 State how you interpreted the task instruction to the satisfaction of the client (acceptance criteria). (3%) |  |
| 1.2 Describe how you analysed, obtained and evaluated further clarifying information, and if the instruction was revised as a result. (3%) |  |
| **2. Design or Develop a solution:** |  |
| 2.1 Describe how you developed and/or analysed alternative solutions to do the task. Impacts checked. (6%) |  |
| 2.2 State what the final solution to perform the task was, client in agreement. (6%) |  |
| **3. Applying Theory:** |  |
| 3.1 State what educational knowledge you used to perform the task. (9%) |  |
| 3.2 State what standard procedure you used to to do the design or task and on what theory these were based. (3%) |  |
| **4. Task Management:** |  |
| 4.1 State how you managed yourself, priorities, processes and resources in doing the task (bar chart). (3%) |  |
| 4.2 Describe your role and contribution in the task team. (3%) |  |
| **5. Communication:** |  |
| 5.1 State how you reported back after completion of the task. (3%) |  |
| 5.2 State how you issued instructions to entities working on the task. (3%) |  |
| **6. Impact:**  |  |
| 6.1 Describe the social and environmental impact of this engineering activity. (3%) |  |
| 6.2 State how you commu-nicated mitigating measures to affected parties.(3%) |  |
| **7. Health and Safety:** |  |
| 7.1 List the major laws and regulations applicable to this particular activity. (3%) |  |
| 7.2 State how you obtained advice in doing risk mana-gement for the task. (3%) |  |
| **8. Ethical Conduct:** |  |
| 8.1 State how you identified ethical issues and affected parties and their interest. (3%) |  |
| 8.2 Confirm that you are conversant and in compliance with ECSA’s Code of Conduct.(3%) |  |
| **9. Engineering Judgement:** |  |
| 9.1 State the factors applicable to the task, their interrelationship. (6%) |  |
| 9.2 Describe how you foresaw task consequences and evaluated situations in the absence of full evidence. (9%) |  |
| **10. Responsible decision making:** |  |
| 9.1 State how you applied theory to justify decisions taken in doing tasks. (9%) |  |
| 9.2 State how you took responsible advice on any matter falling outside your own education and experience. (6%) |  |
| 9.3 Describe how you took, responsibility for your own work by evaluating your work output and revising any shortcoming. (9%) |  |
| An additional 6% can be earned from evidence of a competency development plan and independent learning ability as reported in the Initial Professional Development Report, Form J5 |

**Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Mentor / Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Mentor/Supervisor printed: Tel. No.:**

**Form J3**

**RE- REGISTRATION AS A LIFTING MACHINERY INSPECTOR**

**Name of Referee Date**

**Address:**

Dear Sir/Madam

I have applied to the Engineering Council of South Africa for **re-registration as a Registered Lifting Machinery Inspector** and hereby request you to provide the Council with your evaluation of my experience and capabilities, on the basis of your personal knowledge thereof.

Please use the attached Forms J4.1 & J4.2 and consult the guideline for referees (Sheet J4).

In making this request to you I acknowledge that the information which will be supplied by you to ECSA is of a confidential nature and that I have no right thereto.

Your co-operation and early despatch of the document direct to the Council would be appreciated, as it would expedite the processing of my application.

Thank you in advance for your co-operation.

Yours faithfully

…………………………………………..

**Signature of Applicant Name of Applicant** (Please print)

**Address:**

 \_\_\_\_\_\_\_\_\_\_

 **Postal Code:**

**Telephone No: Cell No:**

**Form J4.1**

**CONFIDENTIAL**

**REFEREE REPORT: RE-REGISTRATION AS A LIFTING MACHINERY INSPECTOR**

**Please complete this form using type or print in black ink, after consulting the attached guideline (Sheet J4).**

The Engineering Council of South Africa agrees that it owes a duty of confidence

to all referees in terms of the Promotion of Access to Information Act, 2000

|  |
| --- |
| **Name of Applicant:** **Address:**  |

**1. General Information:**

 (a) My **personal** knowledge of the applicant's engineering experience extends from

 to (month and year closely as possible).

1. My association with the applicant was that of:

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Mentor** |  | **Colleague** |  | **Supervisor** |  | **Employer** |  | **Other *(Describe)*** |  |

 (c) Are you related to the applicant by birth or marriage? Yes No

 If yes, please state relationship

1. **Lifting Machinery Inspection Experience:**

 My personal knowledge of the applicant's lifting machinery inspection experience is as follows:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **From** | **To** | **Position held** | **Type of work performed** | **Employer** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Form J4.2**

1. **Assessment of Applicant**
2. Based on my personal knowledge of the applicant of whom information has been supplied above, I assess his/her level as follows:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Very low** | **Low** | **Satisfactory** | **High** | **Very High** | **Unknown** |
| 1. Ability to define, investigate and analyse Lifting Machinery Inspection problems |  |  |  |  |  |  |
| 2. Ability to design or develop solutions to LMI problems |  |  |  |  |  |  |
| 3. Ability to comprehend and apply LMI knowledge in practice |  |  |  |  |  |  |
| 4. Ability to manage part or all of one or more LMI activities |  |  |  |  |  |  |
| 5. Ability to communicate clearly with others |  |  |  |  |  |  |
| 6. Ability to recognise the foreseeable social, cultural and environmental effects of LMI activities. |  |  |  |  |  |  |
| 7. Ability to meet legal and regulatory requirements protecting the health and safety of persons |  |  |  |  |  |  |
| 8. Ability to conduct LMI activities ethically |  |  |  |  |  |  |
| 9. Ability to exercise sound LMI engineering judgement |  |  |  |  |  |  |
| 10. Ability to accept responsibility for making LMI decisions |  |  |  |  |  |  |
| 11. Ability to undertake independent LMI learning activities |  |  |  |  |  |  |

(b) Additional comments: (must be completed if assessment is “Very Low”, “Low”, or “Unknown”)

1. **Referee’s Recommendation:**

 I regard the applicant competent to be **re-registered as a Lifting Machinery Inspector**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Yes** | **No (Do not register)** | **Defer** | **Do not know** |
|  |  |  |  |

Please motivate your recommendation:

**5. Declaration by Referee:** I hereby confirm that I am conversant with the Council’s requirements for registration as set out in R-01-POL-SC as well as the instructions on this referee report, and that I am prepared to substantiate my view expressed herein at an interview, should the Council require me to do so. I also confirm that I submit this information to ECSA on the understanding that it will be treated as confidential.

**Name of Referee:**  **Title of Position held:**

**Qualifications:**

 **ECSA Registration Category:** **Registration No:**

 e.g. Technician, Engineer, LMI, etc.

 **Employer:** **Tel/Cell. No:**

 **Signature of Referee:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:**

**Please post to:**

**⇨ The Chief Executive Officer ⚫ Engineering Council of South Africa**

**Private Bag X691 ⚫ BRUMA ⚫ 2026**

#  Addendum B

|  |
| --- |
| National Certificate in Lifting Machine Inspection – Level 5 |

|  |  |
| --- | --- |
| **SAQA QUAL ID** | **QUALIFICATION TITLE** |
|  | Certificate: Lifting Machine Inspection  |
| **SGB NAME** | **ABET BAND** | **PROVIDER NAME** |
|   | Undefined  | Engineering Council of SA  |
| **QUALIFICATION CODE** | **QUAL TYPE** | **SUBFIELD** |
|  | National Certificate  | Engineering and Related Design  |
| **MINIMUM CREDITS** | **NQF LEVEL** | **QUALIFICATION CLASS** |
| 120  | Level 5 |  |
| **SAQA DECISION NUMBER** | **REGISTRATION START DATE** | **REGISTRATION END DATE** |
|  |  |  |

**Rationale for the qualification:**

The South African legislation specifies that all lifting machines must be inspected at prescribed intervals by a registered lifting machine inspector. This qualification provides a learner with all the skills and knowledge required of a lifting machine inspector and may be seen as a pathway towards registration as a lifting machine inspector.

The majority of the candidates for this qualification are likely to be working in the lifting machinery or engineering industry. This qualification will give them the opportunity to balance their practical skills with the essential knowledge needed to earn a formal qualification in lifting machine inspection without formal education becoming an impassable barrier.

There is a critical need in the industry to identify people who are able to conduct the essential operations associated with efficient and safe lifting machine inspection. This will lead to competence in the field of work and thereby add safety and value to the industry and improve the economy of the country. It will also lead to a balanced society in that learners will understand how the work they do fits into the greater engineering industry.

**Purpose of the qualification:**

This qualification is aimed at people who work or intend to work within the lifting machinery industry, and who seek recognition for essential skills in lifting machine inspection.

Recipients of this qualification know about and are able to conduct lifting machine inspections to ensure safe conditions of these machines.

The qualification is designed to be flexible and accessible so that people are able to demonstrate the competencies required to work safely in the lifting machinery industry.

People credited with this qualification are able to:

* Communicate in the workplace
* Compile and maintain work schedules
* Apply engineering skills in the workplace
* Comply with relevant legislation in the workplace
* Inspect lifting machinery and equipment

**Access to the qualification:**

This qualification is open to anyone with access to learning opportunities and work experience in the areas reflected in the exit level outcomes. It is advisable that candidates should already have addressed the areas reflected under “learning assumptions” before embarking on learning towards this qualification, although the exact starting point depends on the available resources for learning.

Candidates applying for this qualification need to demonstrate competence in inspecting lifting machines and should therefore be physically able to contend with the circumstances required for lifting machine inspection.

**Learning assumptions:**

It is assumed that candidates embarking on learning towards this qualification are already competent in the following areas:

* Mathematics at NQF level 4
* Safe working practices
* Basic knowledge of electrical theory
* Basic knowledge of hydraulic theory
* Basic knowledge of engineering practices
* Working at heights and/or in confined spaces
* Selecting, using and caring for engineering measuring equipment
* Reading and interpreting engineering drawings
* The ability to function as an artisan in a relevant discipline

**Articulation possibilities:**

The exit level outcomes are based on progressive learning from the learning assumptions and are broad-based in order to facilitate entry to a number of further programmes in the field of electrical, mechanical or electro/mechanical engineering.

Employers or institutions should be able to evaluate the outcomes of this qualification against the needs of their context and structure top-up learning appropriately.

**Exit level outcomes:**

Exit level outcomes defined below are stated generically and may be assessed in various engineering disciplinary or cross-disciplinary contexts in a provider-based or simulated practice environment. Generic Competencies may be assessed in various engineering disciplinary or cross-disciplinary contexts.

For award of the *whole* qualification, candidates must achieve competence against all the criteria as specified in the Exit Level Outcomes. Should candidates exit the qualification *without completing the whole qualification*, recognition may be given for each Exit Level Outcome achieved.

Candidates will be assessed in the area of work that they have been exposed to. It is not expected that all candidates will be able to conduct inspections on all types of lifting machinery. It is the responsibility of the assessor to ascertain the specific areas in which the candidate will be required to work and provide an opportunity for the candidate to demonstrate competency in that particular area. All assessment criteria must be met for each category of inspection undertaken, as detailed below:

**Associated Assessment criteria:**

**Exit Level Outcome 1: Communicate in the workplace**

1. Reports are generated from available data
2. Data is presented in accordance with the relevant needs of target audiences
3. Oral communication is suited to the work context.
4. Written communication is clear and unambiguous and at an appropriate level for designated target audiences.

**Exit level Outcome 2: Compile and maintain work schedules**

1. Scheduling is described in terms of its purpose and process
2. Project activities are defined in terms of the required project outcomes
3. Project plans are compiled in terms of identified activities
4. Activities are sequenced in terms of workflow and timelines
5. Activities are reported on in accordance with workplace requirements
6. Paperwork is recorded and stored in accordance with workplace requirements
7. Work activities are completed in accordance with agreed timeframes and efficiency

**Exit level Outcome 3: Apply engineering skills to the workplace**

1. Flow characteristics are explained in terms of engineering principles
2. Measurement of flow is explained in terms of fluid principles
3. Ferrous and non-ferrous metals are explained in terms of their properties and uses
4. Ferrous and non-ferrous alloys are explained in terms of their properties and uses
5. Thermos plastics and thermosetting plastics are explained in terms of their properties and uses
6. Machining principles are explained in terms of functions and accuracy
7. Work functions are explained in terms of quality in engineering practice
8. Engineering risks are identified in terms of the potential impact for each risk on the project
9. Actions to improve work functions are identified and analysed in terms of available options
10. Recommendations are communicated to relevant personnel in accordance with workplace requirements

**Exit level Outcome 4: Comply with relevant legislation in the workplace**

1. Legislation relevant to the work activities is identified and accessed in accordance with workplace requirements
2. Legislation is interpreted in terms of the applicability to required work activities
3. The implications of non-compliance with legislation is explained in terms of work processes and penalties
4. Compliance reports are generated in terms of work activities

**Exit level Outcome 5: Inspect lifting machinery and equipment**

**Range:** Candidates will be assessed against lifting tackle and at least one of the following categories –

* Chain hoists
* Work platforms
* Jib cranes
* Tower cranes
* Overhead cranes
* Mobile cranes
* Lift Trucks
* Vehicle hoists
* Other specialisation categories
1. Inspection activities are planned in accordance with the inspection required and the workplace requirements
2. The purpose of conducting various tests is explained in terms of relevant legislation and user safety standards
3. Inspection and testing equipment selected is appropriate to the inspection required
4. Authorisation to conduct inspection activities is obtained in accordance with workplace procedures
5. The work area is prepared for the relevant inspection in accordance with inspection requirements
6. Defects and potentially hazardous conditions are identified and corrected in accordance with workplace requirements
7. Public access to the worksite is restricted in accordance with statutory requirements and worksite procedures
8. Machinery and equipment is inspected and tested in accordance with test schedules and relevant safety standards
9. Deviances from acceptable standards are identified and reported to the relevant stakeholder in accordance with statutory requirements and manufacturer specifications
10. The consequences of omitting any part of the inspection and testing schedule are explained in terms of potential risks and liability
11. The worksite is cleared, secured and restored to a safe and serviceable condition in accordance with statutory and worksite requirements
12. Work activities are completed within agreed timeframes. The importance of completing activities in these timeframes is explained in terms of customer service and work interruptions

**Assessment principles:**

Assessment should be in accordance with the following general and specific principles:

* The initial assessment activities should focus on gathering evidence in terms of the main outcomes expressed to ensure assessment is integrated rather than fragmented. Where assessment at the broader level is unmanageable, then the assessment can focus on each assessment criterion, or groups of assessment criteria.
* Evidence must be gathered across the entire range specified in each Exit Level Outcome, as applicable. Assessment activities should be as close to the real performance as possible, and where simulations or role-plays are used, there should be supporting evidence to prove that the candidate is able to perform in the real situation.
* All assessments should be conducted in accordance with the following universally accepted principles of assessment:
	+ use appropriate, fair and manageable methods that are integrated into real work-related or learning situations;
	+ judge evidence on the basis of its validity, currency, authenticity and sufficiency; and
	+ ensure assessment processes are systematic, open and consistent.

**Recognition of prior learning:**

This qualification can be achieved wholly or in part through recognition of prior learning in terms of the defined exit level outcomes, but training providers must take full responsibility for assessing the exit level outcomes.

Evidence can be presented in various ways, including international and/or previous local qualifications, products, reports, testimonials mentioning functions performed, work records, portfolios, videos of practice and performance records.

All such evidence will be judged in accordance with the general principles of assessment described above and the requirements for integrated assessment.

**Accreditation and Moderation:**

* Providers offering learning towards achievement of any of the outcomes that make up this qualification must be accredited through the Engineering Council of SA.
* Internal moderation of assessment must take place at the point of assessment with external moderation provided by the relevant ETQA in conjunction with the Lifting Machinery Industry, according to the moderation guidelines and the agreed ETQA procedures.
* Providers of programmes shall in the quality assurance process demonstrate that an effective moderation process exists to ensure that the assessment system is consistent and fair.

**Registration of assessors:**

Registration of assessors is delegated by the Higher Education Quality Committee to the Higher Education providers responsible for delivering learning programmes. The following criteria are specified for assessors concerning the technical aspects of the qualification:

* An appropriate qualification with at least 5 years’ practical experience in a lifting machinery environment.
* Appropriate experience and understanding of assessment theory, processes and practices.
* Good interpersonal skills and ability to balance the conflicting requirements of the interests of the learner, the provider and the employer.

**Critical cross-field outcomes:**

This qualification addresses the following critical cross-field outcomes:

(a) Identifying and solving problems in which responses indicate that responsible decisions using critical and creative thinking have been made. *[ELO 2; ELO 3; ELO 5]*

(b) Working effectively with others as a member of a team, group, organisation or community.

 *[ELO 1; ELO 2; ELO 4; ELO 5]*

(c) Organising and managing oneself and one’s activities responsibly and effectively.

 *[ELO 2; ELO 3; ELO 5]*

(d) Collecting, analysing, organising and critically evaluating information. *[ELO 1; ELO 2; ELO 3; ELO 5]*

(e) Communicating effectively using visual, mathematical and/or language skills in the modes of oral/written persuasion. *[ELO 1; ELO 2; ELO 5]*

(f) Using science and technology effectively and critically, showing responsibility towards the environment and health of others. *[ELO 1; ELO 2; ELO 3; ELO 5]*

(g) Demonstrating and understanding of the world as a set of related systems by recognising that problem-solving contexts do not exist in isolation.  *[ELO 2; ELO 3; ELO 5]*

Learning programmes directed towards this qualification will also contribute to the full personal development of each learner and the social and economic development of society at large, by making individuals aware of the importance of:

1. Reflecting on and exploring a variety of strategies to learn more effectively.
2. Participating as responsible citizens in the life of local, national and global communities.
3. Being culturally and aesthetically sensitive across a range of social contexts.
4. Exploring education and career opportunities; and developing entrepreneurial opportunities.

**DISABILITY REGISTER**

Disability is defined as: “Persons with disabilities including those who have long-term physical, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others”.

**Name & Surname:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do you have any disability (Please tick):**

|  |  |
| --- | --- |
| **Yes** | **No** |

**If yes, state nature of Disability:**

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**NB: Completion of this form is necessary in order to accurately reflect disability statistics in terms of Employment Equity Act, No 55 of 1998.**