| **WITNESS STATUS LIST** |
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| By signing the Witness Status List and countersigning the Work Experience Record entries, the RIW Cardholder’s Workplace Supervisor is confirming activities as documented are a true reflection of the work completed by the RIW Cardholder and attested proficiency level. Workplace Supervisors may be held responsible for any inaccuracies in this process. All Workplace Supervisors countersigning Work Experience Record entries shall provide their details in the table below. |
| **Ref** | **First Name / Surname** | **Organisation** | **RIW Role** | **RIW Number** | **Signature** | **Initials** | **Date** |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |

| **RECORD OF WORK EXPERIENCE** |
| --- |
| **Guidance Notes for Completing Record of Work Experience**1. RIW Cardholder's should populate the work experience fields below, including dates, client and description of the task. Description should include your role, proficiency, degree of supervision, complexity of task and general comments supporting the task plus any specific equipment or system types worked on.
2. Prior to verification signature, RIW Cardholder's should also cross reference the task to the SoC Task Reference making it easier for the Workgroup Supervisor and Assessor to identify the task evidence required of the SoC.
3. It is recommended that the Work Experience Record is updated on a monthly basis, no longer than 3 months and at the end of project work.
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| --- | --- | --- | --- | --- | --- | --- |
| **Dates:** from / to | **Client:** Employer, Contractor in Charge, Joint Venture, Project and/or Network Operator | **Description of Task:** In terms of your role, proficiency, degree of supervision, complexity of task and general comments | **SoC Task Reference** | **Equipment or System Types** | **Verification Signature and ID Reference from the Witness Status List** | **Workplace Supervisor Observations** (Assessment / Follow-up / Reassessment) |
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| **CONTINUAL PROFESSIONAL DEVELOPMENT** |
| **Guidance Notes for Continual Professional Development** 1. RIW Cardholder's should enter the date/dates of the activity and briefly indicate the learning outcome. For example, when attending a seminar, the learning outcome may be the application of new technology to signalling equipment. RIW Cardholder's should also list any in-house, external or accredited courses and where applicable, list the SoC Task reference.
 |
| **Date** | **Activity** | **SoC Task Reference** **(if applicable)** | **Verification Signature,** **Name and ID Ref. from the Witness Status List** |
|  |  |  |  |
| **LOGBOOK REVIEW**  |
| **Guidance Notes for Completing the Logbook Review** 1. As stated in Section 3.9 of the National Signalling Assessment Framework, Logbook Reviews shall be completed:
* Annually by the RIW Cardholder's Workplace Supervisor,
* Prior to job role is submitted for assessment, indicating the Logbook and the self-assessed SoC are ready for assessment, and
* When the Logbook is reviewed by the Assessor.
1. The reviewer must provide sufficient detail as to why any sections have or have not been met.
 |
| **Date** | **Logbook Section** | **Section requirements met** | **Action Points** | **Date to be completed** | **Verification Signature,****Name and ID Ref. from the Witness Status List** |
| **Y/N** | **Reviewer to describe how the section requirements have / have not been met** |
|  | Witness Status List |  |  |  |  |  |
|  | Record of Work Experience |  |  |  |  |  |
|  | Continual Professional Development |  |  |  |  |  |