PARTICIPANT ASSESSMENT

PARTICIPANT:

EMPLOYER: QUALIFICATION: SIR20207 – Certificate II in Retail

ASSESSOR: DATE:

UNIT CODE: SIRXCOM001A & SIRXCCS002A UNIT NAME: Communicate in the Workplace & Interact with Customers (Holistic Assessment)

<table>
<thead>
<tr>
<th>Pre-requisite unit/s</th>
<th>Performance Criteria Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment Reference</td>
<td>No</td>
</tr>
<tr>
<td>Part A</td>
<td>1.1 - 1.5, 2.1 - 2.5, 3.1 - 3.4, 4.1 - 4.8, 5.1 - 5.2 &amp; 1.1 - 1.10, 2.1 - 2.8, 3.1 - 3.4, 4.1 - 4.3</td>
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<tr>
<td>Part B</td>
<td>1.1 - 1.5, 2.1 - 2.5, 3.1 - 3.4, 4.1 - 4.8, 5.1 - 5.2 &amp; 1.1 - 1.10, 2.1 - 2.8, 3.1 - 3.4, 4.1 - 4.3</td>
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<tr>
<td>Part C</td>
<td>1.1 - 1.5, 2.1 - 2.5, 3.1 - 3.4, 4.1 - 4.8, 5.1 - 5.2 &amp; 1.1 - 1.10, 2.1 - 2.8, 3.1 - 3.4, 4.1 - 4.3</td>
</tr>
</tbody>
</table>

Participant Assessment Instructions

A copy of all work submitted is available upon request.

Part A oral assessment questions which will be completed either verbally or via written test.

Part B contains observation outcomes of criteria undertaken by your trainer and comments.

Part C contains your written activities

CONDUCT / RECORD ASSESSMENT

Assessment Outcome Reference: C = Competent NYC = Not Yet Competent

Assessment Method Reference:
P = Practical Demonstration O = Observation
W = Written Assessment V = Verbal Assessment T = Third Party Testimonial

<table>
<thead>
<tr>
<th>Unit Code</th>
<th>Unit of Competence Name</th>
<th>Assessment Method</th>
<th>Assessment Environment</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>SIRXCOM001A &amp; SIRXCCS002A</td>
<td>Communicate in the Workplace &amp; Interact with Customers</td>
<td></td>
<td>On the Job</td>
<td></td>
</tr>
</tbody>
</table>
REVIEW ASSESSMENT

Assessor Feedback to Participant (Including further action if deemed NYC / training commenced in an other unit)

Participant Feedback to Assessor

Participant Signature: Date:

Employer Feedback to Assessor

Employer Signature: Date:

Next scheduled visit date: