



Power System Safety – Manager’s Endorsement Form

I _____ Manager acknowledge that I am responsible for ensuring Employees, for whom I am responsible, shall only perform work for which he / she is competent, approved / authorised and can be performed safely. (reference: Power System Safety Rules Section 4 – General Safety Provisions)

I recommend _____ Applicant's Name Employee Number: _____ Aurora, Hydro and Transend only for Power System Safety training in the following work environment / s: (Note: Instructed Persons are automatically given all three)

Recommendation for Training Level & Statement of Work Environment Competence

(Please initial the appropriate boxes and cross through the others – Instructed Person training lasts for life, PIC and IO valid for two years)

<input type="checkbox"/> Instructed Person	<input type="checkbox"/> Person in Charge	<input type="checkbox"/> Issuing Officer
<input checked="" type="checkbox"/> Civil	<input type="checkbox"/> Civil	<input type="checkbox"/> Civil
<input checked="" type="checkbox"/> Electrical	<input type="checkbox"/> Electrical	<input type="checkbox"/> Electrical
<input checked="" type="checkbox"/> Mechanical	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Mechanical

Work Environment Competence:

- Civil** Environment may contain structures such as roads, bridges, dams, canals, flumes, buildings, grounds etc.
- Electrical** Environment may contain electrical hazards, electrical apparatus, overhead/underground/concealed conductors that are energised or can be energised etc.
- Mechanical** Environment may contain mechanical hazards that may include rotating/moving apparatus, hydraulic or pneumatic apparatus, and may contain stored/radiant energy etc.

Manager’s Name: _____ Signature: _____

Company Name: _____

Address: _____

Applicants Acknowledgment

As a person, endorsed for the work activity within the designated work environment, I acknowledge that I am prepared to fulfil the responsibilities of the role as detailed in the Power System Safety Rules.

I also understand that any violation of the Power System Safety Rules will be subject to the Power System Safety Non-Compliance procedure and relevant Code of Discipline.

In addition, I acknowledge provisions of the Workplace Health and Safety Act 1995 as set out but not limited to the following:

- That I take reasonable care of my own health and safety, and the health and safety of other persons who may be affected by my acts or omissions at the workplace.
- That I comply with any direction given to me.
- That an employee may refuse to work if they believe there is a risk of serious or imminent injury, and it is not within their ability to rectify the cause of risk, so long as he or she immediately notifies the person in charge of work, and that he or she may be given reasonable alternative work until the cause of risk has been rectified. Any employees who refuse to work under such circumstances shall not be discriminated against.
- That it is an offence under the Act to be in such a state (by the consumption of alcohol or drugs) to endanger others or myself in the workplace.

I acknowledge that if authorised as a Person in Charge or Issuing Officer it is my responsibility to maintain current authorisation for work under the Power System Safety Rules by completing the appropriate refresher training and assessment as required every two (2) years to retain authorisation.

I acknowledge that following a non-compliance with these rules, my authorisation may be withdrawn by direction of an officer authorised by a signatory company and my passport flagged.

Applicant's Name: _____ Phone No. _____

Address: _____

Applicants Signature: _____ Date: / /