AUSTRALIAN LIFESAVING ACADEMY NEW SOUTH WALES	**Training Course Report** Season: 2016/17 Date Revised: August 2016 Version No: 5.2

A Training Course Report must be completed by a Trainer, Assessor or Facilitator for each course that is delivered.

COURSE DETAILS				
Course			SurfGuard ID #	
Venue			Start Date	
Course Staff	*Include here all Trainers, Assessors, Facilitators and content experts involved in the delivery of the course.*			
	Name	Role (i.e. Trainer, Content Expert)	Endorsed	Probationary
			☐E	☐P
			☐E	☐P
			☐E	☐P
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PRE-COURSE INDUCTION CHECKLIST		
☐I	*Participant Joining Instructions* sent to all participants	The Participant Joining Instructions contain important information about the Unique Student Identifier (USI) and about where participants can find relevant policies and procedures.
☐I	Pre-requisites / Assessment Requests	What are the course pre-requisites and do all participants hold them? Has an Assessment Request been created to ensure that award and age pre-requisites are satisfied?

VENUE CHECKLIST – Complete prior to commencement of Training Course.					
Checklist completed on		**By**		**Yes**	**No**
Is the size / layout of the venue adequate for the course (including parking arrangements)?				☐Y	☐N
Are there adequate facilities / furniture for both large and small group activities?				☐Y	☐N
Are there adequate arrangements for lighting / temperature control?				☐Y	☐N
Is the venue accessible (i.e. disabled parking, access and toilets)?				☐Y	☐N
Are emergency exits well indicated?				☐Y	☐N
Are there appropriate catering (including drinking water) arrangements in place for staff / participants?				☐Y	☐N
Do you have the required equipment and resources to deliver the course?				☐Y	☐N
Is all course equipment in a satisfactory state and safe to use?				☐Y	☐N
Have you carried out (or reviewed) the risk assessment for the venue to ensure the safety of course staff and participants?				☐Y	☐N
Comments – *Include here any information that future users of the venue / equipment / resources should consider.*					
Remember to inform the Club/Branch Safety Officer or a member of the Club/Branch Management Committee if any significant hazard(s) are identified that need addressing.					

COURSE INDUCTION CHECKLIST		
Check off each point individually **OR** confirm at the end that you have covered this information.		
☐	Emergency Procedures	What is the emergency evacuation procedure? Where are the fire exits, assembly points etc.
☐	Facilities	What facilities are available at the venue and where are they located? E.g. toilets, kitchen, first aid room.
☐	Course Costs	Total course fees, manual/workbook cost, certificate cost, reprinting certificate cost
☐	Course Outcomes	Does the course lead to a nationally recognised qualification / unit(s) of competency? What are they? What award and job functions will the course lead to?
☐	Course Duration	How long will the course take to complete? How many and how long are the breaks? When will the assessment occur?
☐	Course Overview	What topics will be covered, what will participants learn?
☐	Training Methods	What kind of training will be involved? E.g. face-to-face workshops, discussions, workbook activities, practical activities.
☐	Assessment Methods	How will participants be assessed? E.g. practical demonstration of skills, written paper, oral questioning.
☐	Participant Feedback Opportunities	Participants can provide feedback any time on the Participant Evaluation of Course (QM303), at the end of their course or complete a Participant Exit Questionnaire (TA301) if exiting the course prior to completion.
☐	**Check here to confirm that all of the above information was covered at the start of the course**	

COURSE SUMMARY	
What went well?	What difficulties occurred?

Participant Exits		
Did any participants leave the course early?	☐ Yes	☐ No
If yes, what was the reason?		

Reasonable Adjustments		
Were any reasonable adjustments (including extensions for any assessments) made?	☐ Yes	☐ No
Please provide details:		

FINAL SIGN OFF BY TRAINER, ASSESSOR OR FACILITATOR
Before forwarding this form to the Branch Director of Education, please ensure the following are attached: • **A copy of the Participant Joining Instructions sent to participants** • **Assessment Portfolios for each candidate** • **Participant Evaluation Forms** • **Assessment Feedback Forms** for anyone deemed NYC in any element • **Hazard Reports** (if they were required and if they haven't already been submitted) Your Branch may also require you to provide them with a copy of: • **Training Enrolment Forms** • **Assessment Request Form (Form 14 print out from SurfGuard)**

Name		TAF Signature	
Date			

FOR COMPLETION BY BRANCH DIRECTOR OF EDUCATION
Review this Training Course Report and the Participant Evaluations. Provide an overview analysis of the course below, along with any issues that require your, or Surf Life Saving NSW's action / attention.
Analysis of course
Issues requiring action / attention (include timescales for completion)
Check one of the following: ☐ All candidates competent ☐ Assessment Feedback Record(s) attached
Check one of the following: ☐ No Hazard Reports ☐ Hazards recorded on Risk Register and actioned

Name		DOE Signature	
Date			

☐ Report reviewed by Branch Education Committee	Date	

COURSE ATTENDANCE RECORD: The attendance record forms part of the Training Course Report – it must be completed and submitted with the report.

If you require more space, an extension sheet can be found on www.surflifesaving.com.au in the Member section.

Course:			**DATE(S) & TOPIC(s)**									
Location:												
SurfGuard ID#:												
Start Date:												
CANDIDATE NAME	**CLUB**	**COMMENTS**										
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Tick to confirm that venue checklist has been revisited and reviewed before each session			☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

Attendance Record Continued…												
CANDIDATE NAME	**CLUB**	**COMMENTS**										
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