Trainers and assessors

## Industry currency log template

This resource is one of a series developed by the QSA to help Queensland’s school RTOs demonstrate compliance with the current Australian Quality Training Framework (AQTF).

QSA resources are not mandatory and school RTOs can use alternative systems and resources. It is the responsibility of individual RTOs to ensure their systems and the corresponding documentation comply with the current AQTF.

Please see our website for more information about the AQTF and other support materials.

## Creating systems that are appropriate to your RTO

* Systems that school RTOs implement will vary according to the RTO’s complexity and scope of operations.
* Forms or other materials may need to be developed by the school to support the policies and procedures.
* Related materials referred to in this document should be hyperlinked to the relevant school RTO documents.
* School RTOs should use a continuous improvement approach that ensures that practice matches policy.
* In general, the evidence to show compliance with the *AQTF Essential Conditions and Standards for Continuing Registration* will be found in existing documentation the school RTO has previously developed for their RTO AQTF management systems. School RTOs should continue to do this, ensuring that current AQTF requirements are met.

## Using QSA resources

This resource is provided for the use of Queensland schools that are RTOs. Its primary purpose is as an example. Its use is not mandatory, and it may be modified freely by school RTOs for their own use. However, schools must ensure that, if modified, the document continues to meet the requirements of the current AQTF.

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## More information

* AQTF publications are available from <[www.training.com.au](http://www.training.com.au)>.
* Training packages are available at <[ntis.gov.au](http://ntis.gov.au/)>.
* Visit the VET section of the QSA website at <[www.qsa.qld.edu.au/576.html](http://www.qsa.qld.edu.au/576.html)>.

# Industry currency log

***Name of trainer/assessor:***

***Qualification code and title:***

**Table A: Work in industry** (that provides evidence of current industry skills)**.** *Use this table to demonstrate how your work in industry relates to the units of competency for which you are the trainer/assessor.*

| **Name of organisation or industry project**  (Provide verification) | **Dates /**  **Time frames** | **Summary of duties undertaken**  (Provide sufficient detail to show relevance to the units of competency identified) | **Relationship to units of competency**  (List units of competency) |
| --- | --- | --- | --- |
| Example: Industry Placement — XYZ Restaurant | Jan – Feb 2010  6 hours/week for 5 weeks | Duties undertaken: table waiting, service, taking orders.  Worked with a wide variety of colleagues and customers at very busy times in the restaurant. | SITXCOM001A, SITXCOM002A,  SITXOHS001B, SITXOHS002B  SITHFAB003A |
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|  |  | **Signature of trainer/assessor:** |  | **Date:** |  |
| --- | --- | --- | --- | --- | --- |
| **Verified by:** | Name of VET coordinator | **Signature of VET coordinator:** |  | **Date:** |  |

**Table B: Other (non-work) industry experiences** (that show continued development of industry currency).*Use this table**to demonstrate how your other industry experiences (e.g. industry journals, development of industry relationships, mentoring) relate to the units of competency for which you are the trainer/assessor.*

| **Activity** | **Dates** | **Duration** | **Skills gained** | **Relationship to units of competency** | |
| --- | --- | --- | --- | --- | --- |
| Example: Work Experience visit: ABC Coffee Shop | 14/09/2010 | 45 minutes | Observed students preparing and serving non-alcoholic beverages and espresso coffee  Discussed current industry trends with manager. | SITHFAB005A  SITHFAB010B  SITHFAB012A  SITHIND001A | Provided current information regarding changing trends in drink requests and current info re industry realistic timelines & customer/staff rations.  Updated industry knowledge which will be taken into consideration with regards to training and assessment. |
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|  |  | **Signature of trainer/assessor:** |  | **Date:** |  |
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| **Verified by:** | Name of VET coordinator | **Signature of VET coordinator:** |  | **Date:** |  |