

## Competency Assessment Form for Heliport Management Personnel

(To be filled by Heliport Safety Inspector and Heliport Certification Project Manager)

<b>Name of Applicant</b>		<b>Name of Position</b>	
<b>Name of Airport</b>		<b>Date of Assessment</b>	
<b>Competency Assessment Results</b>			
No	Competency Assessment Component	Possible Marks	Marks Obtained
1	Qualification	Mandatory	Check (X) one box Yes <input type="checkbox"/> No <input type="checkbox"/>
2	Experience	10	
3	Training	10	
4	Written Test	50	
5	Personal Interview	30	
<b>Total</b>		<b>100</b>	
<b>Assessment Committee (Min 3 Member)</b>	Name:	Sign:	
	Name:	Sign:	
	Name:	Sign:	
	Name:	Sign:	
<b>Heliport Certification Project Manager Recommendation</b>			
<b>Assessment Results (Tick Mark ✓)</b>		<b>Competency Assessment Outcomes Remarks, if any</b>	
<b>Accepted</b>			
<b>Accepted with Conditions</b>		Condition 1: ..... Condition 2: .....	
<b>Not Accepted</b>		Reason(s) :	
<b>Competency Assessment Validation</b>			
<b>Signature of Designated HCPM:</b> .....		<b>Signature of Concerned Department Manager:</b>	
<b>Name:</b> .....		.....	
<b>Date:</b> .....		<b>Name:</b> .....	
		<b>Date:</b> .....	

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