



eProfiling

Ph 1300 477 808 Fax 07 3276 8252
 Email enquiries@eprofiling.com.au

COMPUTER SYSTEMS PREVIOUS WORK RECOGNITION

NAME: _____ PROFILING REGO NO: _____

WEEKS COVERED BY SUMMARY SHEET: _____

| ACTIVITY | ACTIVITY HOURS PER YEAR | | | |
|---|-------------------------|----------------------|----------------------|----------------------|
| | 1 ST YEAR | 2 ND YEAR | 3 RD YEAR | 4 TH YEAR |
| CORE WORK ACTIVITIES | | | | |
| Test Electronic Apparatus/Circuits | | | | |
| Install Electronic Apparatus | | | | |
| Commission Electronic Apparatus/Circuits | | | | |
| Diagnose/Rectify Faults Electronic Apparatus/Circuits | | | | |
| Maintain Electronic Apparatus/Circuits | | | | |
| OPTIONAL WORK ACTIVITIES | | | | |
| Attach flexible plugs & cords | | | | |
| OTHER HOURS (not mandatory) | | | | |
| Supporting activities | | | | |
| Total hours off job training – TAFE etc. | | | | |
| Sick Leave | | | | |
| Total of all other leave/RDO's | | | | |
| TOTAL OF HOURS PER YEAR: | | | | |

This summary sheet cannot be processed unless verified by a Registered Training Organisation (RTO) representative & employer.

Please return to your RTO for verification using the fax number below.

The verified form will be forwarded to eProfiling & downloaded against the apprentices' profile.

Verified By:

| | |
|----------------------|-------------------------------|
| BUSINESS NAME: _____ | |
| EMPLOYER REP: _____ | SIGNATURE EMPLOYER REP: _____ |

| | |
|--------------------------------|-------------------|
| RTO: _____ | RTO REP: _____ |
| SIGNATURE RTO REP: _____ | FAX NUMBER: _____ |
| UPDATED REPORT REQUIRED? _____ | |