

Self-assessment tool for General Electrician (ASCO: 4311-11)



About this self-assessment tool

This tool will help you to decide whether you have the required training, work experience and competencies (skills) to meet Australian standards as an Electrician.

Read the questions carefully. Tick the box with the best answer.

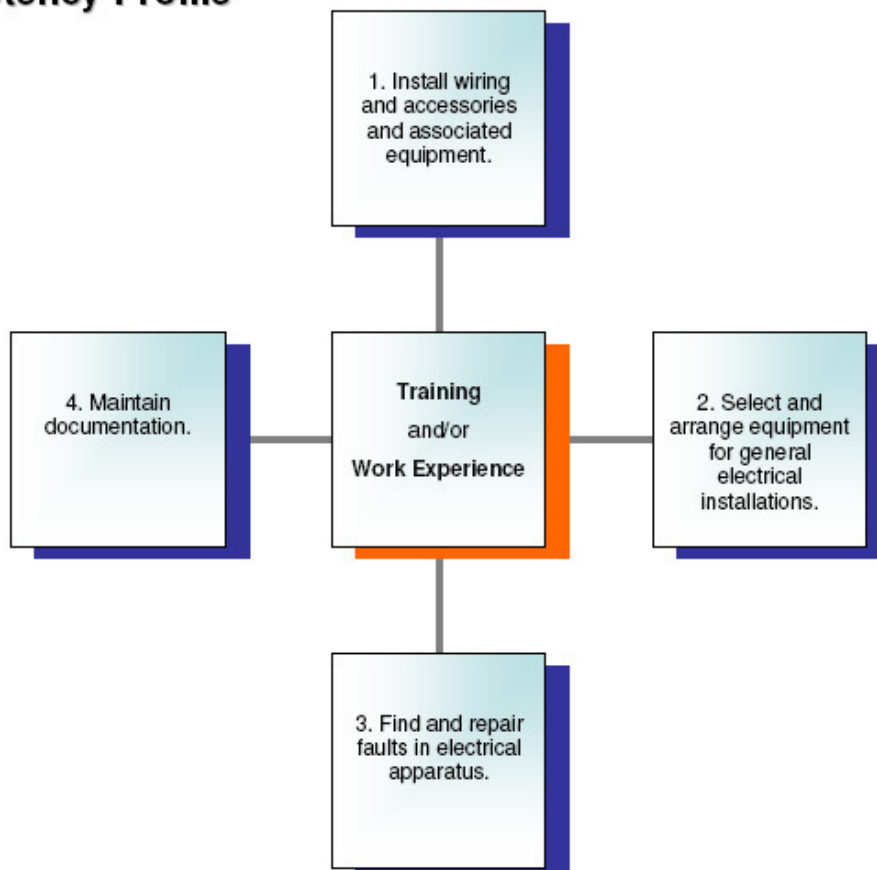
Use your answers to guide your decision about whether to apply for a trade skills assessment.

It is recommended that you can answer 'yes' to each competency group question and can tick a majority of boxes that indicate that you have 'regularly' done the work.

Please note that if you submit an application you will be asked to supply documented evidence to support your claims. If your evidence is suitable you will be asked to demonstrate your competencies in a practical skills assessment.

Your evidence will be used to determine if you meet the competency profile for an Electrician. The diagram below gives an overview of the competencies (skills) that are expected of an Electrician in Australia.

Competency Profile





Training and experience

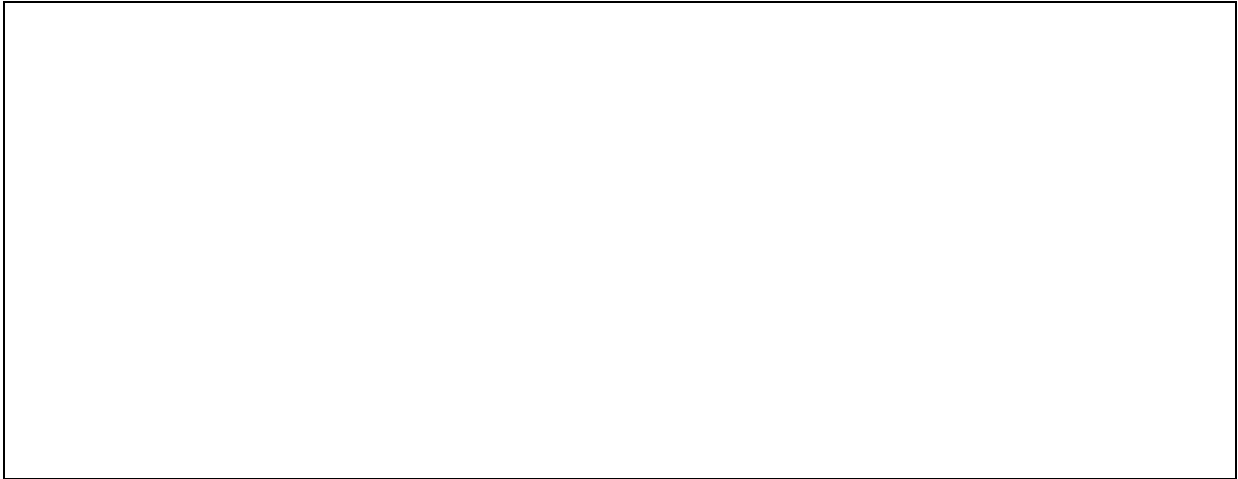
Your Training	Yes	No	Not Sure
Have you undertaken formal training in the Electrical trade?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If yes:</i>			
Was this training undertaken at an accredited training institution?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the training require you to do practical experience in a workshop?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did the training require you to do practical experience on a work site?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was this qualification awarded by an Industry Body or Association or regulatory authority?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you able to provide results and/or transcripts of trade training that you have completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your Work Experience	Yes	No	Not Sure
Whilst working as a General Electrician, which of the following areas do you feel confident you could demonstrate competency to an assessor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Electrician:</i>			
1. Domestic Installations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Large Commercial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Industrial Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Lifts and Escalators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Large Scale Air Conditioning Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Large Scale Fire Service Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Mining Industry Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your experience may be one or a Combination of the above			



Competency groups

1. Are you able to lay and install LV electrical wiring and associated apparatus?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<i>If yes: Do you have evidence?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Regularly</i>	<i>Sometimes</i>	<i>Never</i>	
Have you laid wiring and terminated accessories for extra LV circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you installed wiring and accessories for LV circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you installed wiring and accessories for LV accessories?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you installed LV electrical apparatus and associated equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are you able to fabricate electrotechnology components and, dismantle, install and connect equipment in an electrical circuit?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<i>If yes: Do you have evidence?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Regularly</i>	<i>Sometimes</i>	<i>Never</i>	
Have you fixed and secured equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you developed and connected control circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you selected and arranged equipment for general electrical installations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you dismantled, assembled and fabricated electrotechnology components?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are you able to solve problems in single and multiple path DC/ AC circuits and solve problems in Electromagnetic circuits?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<i>If yes: Do you have evidence?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Regularly</i>	<i>Sometimes</i>	<i>Never</i>	
Have you solved problems in extra LV single path circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you solved problems in multiple DC path circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you solved problems in electromagnetic circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you solved problems in single-phase and three-phase low voltage circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you found and repaired faults in electrical apparatus and circuits?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are you able to manage all documentation associated with inspection and compliance of electrical equipment and circuits?	<input type="checkbox"/> Yes		<input type="checkbox"/> No	
<i>If yes: Do you have evidence?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Regularly</i>	<i>Sometimes</i>	<i>Never</i>	
Have you verified the compliance and functionality of general electric installations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you documented occupational hazards and risks in electrical work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Have you maintained documentation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes

A large, empty rectangular box with a thin black border, intended for the user to write their notes.