

## TRAFFIC CONTROLLER – EMPLOYERS DECLARATION OF INDUSTRY EXPERIENCE

RIIWH205D - Control traffic with a stop-slow bat  
RIIWH201D - Work safely and follow WHS policies and procedures  
RIICOM201D - Communicate in the workplace

This form has been designed to collect sufficient evidence in the RPL/recertification process.

### 1. PARTICIPANT DETAILS

Participant Name

Current Job Title

Current Blue Card Number

Current Blue Card Expiry Date

### 2. EMPLOYER DETAILS

Name of person verifying participant's experience

Company Name

Title/Role in Company

Relationship to the participant (eg Manager/Supervisor)

Signature

Date

### 3. RELEVANT TRAFFIC CONTROL EXPERIENCE DETAILS

#### **A) At least 12 months demonstrated current industry experience in Control Traffic with A Stop-Slow Bat (Previously Blue Card).**

*Please provide in written detail in the space below the relevant functions performed by the applicant in their role. The objective of this is to demonstrate that they have the required current knowledge, experience and skill to be considered for recertification.*

**B) Timeframe performing the functions above.**

- 1 - 2 years
- 2- 5 years
- More than 5 years

**C) Please select the types of equipment and tools that the employee uses currently to manage traffic control duties.**

- Signs
- Tapers
- Arrow Boards
- Warning Lights and Beacons 2
- Way Radio
- Traffic Cones
- Stop Slow Bats
- Barricades and Barriers
- PPE
- Bollards

**D) Additional information**

*If applicable.*

## 4. EMPLOYERS DECLARATION

I declare and understand that the information supplied in this application is true and correct in every particular.

Name (print)

Signature:

## 5. TRAINER COMMENTS

*If applicable*

## IMPLEMENT TRAFFIC CONTROL PLAN EMPLOYERS DECLARATION OF INDUSTRY EXPERIENCE

RIIWS302D – Implement Traffic Management plan  
RIIWS201D - Work safely and follow WHS policies and procedures  
RIICOM201D - Communicate in the workplace

This form has been designed to collect sufficient evidence in the RPL/recertification process.

### 4. PARTICIPANT DETAILS

Participant Name

Current Job Title

Current Yellow Card Number

Current Yellow Card Expiry Date

### 5. EMPLOYER DETAILS

Name of person verifying participant's experience

Company Name

Title/Role in Company

Relationship to the participant (eg Manager/Supervisor)

Signature

Date

## 6. RELEVANT TRAFFIC CONTROL EXPERIENCE DETAILS

### **B) At least 12 months demonstrated current industry experience in Implement Traffic Control Plan (Previously Yellow Card).**

*Please provide in written detail in the space below the relevant functions performed by the applicant in their role. The objective of this is to demonstrate that they have the required current knowledge, experience and skill to be considered for recertification.*

**B) Timeframe performing the functions above.**

1 - 2 years

2- 5 years

More than 5 years

**C) Please select the types of equipment and tools that the employee uses currently to manage traffic control duties.**

Signs

Tapers

Arrow Boards

Warning Lights and Beacons 2

Way Radio

Traffic Cones

Stop Slow Bats

Barricades and Barriers

PPE

Bollards

**D) Additional information**

*If applicable.*

## 4. EMPLOYERS DECLARATION

I declare and understand that the information supplied in this application is true and correct in every particular.

Name (print)

Signature:

## 5. TRAINER COMMENTS

*If applicable*