# Statement of experience

**Underground supervisor (with qualification) – two (2) years’ employment on an underground mine**

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| **SECTION 1: DETAILS OF EXPERIENCE**  **Minimum experience requirement is the completion of 2 years’ fulltime employment on an underground mine.** | | | | | | |
| **CANDIDATE NAME** | Click or tap here to enter text. | | | | | |
| **Name of employer and minesite**  **Use a separate template for each employer** | | **Position(s)** | | | **Dates in the role**  **dd/mm/yyyy to dd/mm/yyyy** | |
| Click or tap here to enter text. | | Click or tap here to enter text. | | | Click or tap here to enter text. | |
| Click or tap here to enter text. | | Click or tap here to enter text. | | | Click or tap here to enter text. | |
| Click or tap here to enter text. | | Click or tap here to enter text. | | | Click or tap here to enter text. | |
|  | | | **Total amount of time completed** | Click or tap here to enter text. | | **Years** |
| Click or tap here to enter text. | | **Months** |

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| **SECTION 2: CERTIFICATION OF EXPERIENCE AND COMPETENCY**  **To be completed by the Superintendent or Manager and the Supervisor from the site where the candidate gained experience on** | | | | | | |
| Name of Superintendent or Manager | | Click or tap here to enter text. | | Name of Supervisor | Click or tap here to enter text. | |
| Work phone Number | Click or tap here to enter text. | | | Work phone Number | Click or tap here to enter text. | |
| Work email address | Click or tap here to enter text. | | | Work email address | Click or tap here to enter text. | |
| Statutory certificate number (optional) | | Click or tap here to enter text. | | Supervisor examination number (optional) | | Click or tap here to enter text. |
| **Please provide a brief overview and confirmation of the candidate’s competency in the roles listed in Section 1. (Mandatory)** | | | | **Please provide a brief overview and confirmation of the candidate’s competency in the roles listed in Section 1.(Mandatory)** | | |
| Click or tap here to enter text. | | | | Click or tap here to enter text. | | |
| **Superintendents or Manager signature** | | |  | **Supervisor signature** |  | |
| **Date** | | | Click or tap here to enter text. | **Date** | Click or tap here to enter text. | |
|  | | | | | | |