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**Certificate IV in**

**Leadership and Management**

BSB42015

Welcome and Getting Started template

### Current Knowledge and Skills Questionnaire

To support us in understanding your individual needs we request that you complete the following questionnaire.

Responses can be just 1-2 sentences, but please provide examples or instances where you have (or had) involvement or responsibility in the key areas covered in this program.

# **Show Leadership in the workplace**

# (Modelling high standards and enhancing the organisations image)

# **Develop workplace priorities**

# (time management and professional development)

# **Make a Presentation**

# (Prepare, deliver and review presentations)

1. **Communicate effectively as a workplace Leaders**

# (Engaging in clear communication)

# **Lead team effectiveness**

# (Setting team goals and achieving team outcomes)

1. **Lead effective workplace relationships**

# (Understanding interpersonal skills and developing trust as a leader)

1. **Promote innovation in a team environment**

# (creating an innovative team environment)

1. **Implement operational plan**

# (Planning and implementing operational plans, resource acquisition)

# **Address customer needs**

# (meeting Internal external customer service needs)

# **Implement customer service standards**

# (Contributing to customer service systems and standards)

1. **Identify risk and apply risk management processes**

# (Identify, analyse, evaluate and treat risks)

1. **Implement and monitor workplace health and safety policies, procedures and programs to meet legislative requirements**

# (implement and monitor WHS and hazards)

Personal Leadership Profile

**What do you believe you currently do well in your leadership role?**

**Are there specific skills and abilities you would like to improve on that would assist you in becoming a better leader?**

As a leader it is important that you have the skills and ability to relate to people from a range of social, cultural and ethnic backgrounds and physical and mental abilities.

**Briefly outline your experience in dealing with a diversity of people and what further skills you would like to acquire.**

I,

* Hereby give permission for copies of my results to be provided to my employer and Government Agencies for the purpose of Proteus Education & Training external audit requirements.
* Authorise the use of individual name and/or image as well as testimonials for RTO marketing material when applicable.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**Third Party Declaration**

**Why:** As so many of the skills covered in this qualification are workplace skills we need to give the student the opportunity to perform these skills in a real workplace scenario. We need your help to make sure they do them, do them well, and do them in line with the organisations expectations. There’s no point performing a great new skill if it is not what is in the team’s interest.

As the student moves through their assessments they are responsible for letting you know what assessments they have to do and what skills they will need to perform. Your role is to provide guidance and witness the skills in action so you can give feedback.

***Please fill in the form below:***

Name:

Job Title:

Company:

Phone:

Email:

Address:

Relationship with the Student:

How long have you known the student:

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ declare that:

* I have read and understand the student handbook and the information about the course my staff member is completing
* I understand that at the end of each unit, I will need to provide feedback to the student based on their performance of skills in the workplace
* I understand that the skills I need to observe or witness are outlined in the assessments
* I understand that it is a requirement that the feedback I give is valid and true
* I give consent for Proteus Education and Training to contact me to verifying any comments and signatures submitted by the student as a part of the monthly periodic spot checks to ensure authenticity
* I understand that I can contact Proteus Education and Training at any time for clarity on my role

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

**ASSESSMENT INSTRUCTIONS**

This is the end of the Welcome & Getting Started template.

Please keep this document in a safe place as you will be required to submit this online.

**Grading and Feedback.**

Feedback will be provided for each question through the Online Learning System. You will receive an email notification of feedback being posted.

If there are any required changes you will be given an opportunity to resubmit.

Proteus Leadership – 1300 219 903 – [online@proteusleadership.com](mailto:online@proteusleadership.com)

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