

## **Training Course Report**Season: 2025/26 Date Revised: July 2025

Version No: 8.2

A Training Course Report must be completed by a Trainer, Assessor or Facilitator for each course that is delivered.

Course	Details											
Course						SurfGuard Assessment ID #						
Club/O	rganisation					Start Date		End Date	te			
Course Team		Include here all Trainers, Assessors, Facilitators, and content experts involved in the delivery of the course.										
		Name				r, Content Expert, Prob ntor, Endorsed Assesso ilitator)		Endorsed	Probationary			
								□E		Р		
								□E		P		
								□Е		P		
								□E		P		
								□E		P		
Pre-co	urse Inductio	on Checkli	i <b>st</b> – Co	omplete prior to c	ommenceme	ent of Training the	Course.					
Participant Joining   The Participant Joining Instructions contain important information about participants can find relevant policies and procedures, and about their Un Identifier (USI).									ent			
	Pre-requisites / Assessment Requests  Do all participants meet the course pre-requisites/entry requirements? Click here Has an Assessment Request been created to ensure that award and age pre-requisites are satisfied?									tes		
Venue	Checklist – C	Complete	prior t	o commencemen	t of Training	the Course.						
VENUE	(1) address:								Ven	ue 1		
Checkl	ist complete	d on:			Ву:				Yes	No		
	ize / layout c ing parking a			quate for the cou	rse to be cor	nducted in a Covid	Safe enviro	nment?	ПΥ	ПΥ		
Are the	ere adequate	facilities,	furnit/	ure for both large	and small gr	oup activities?			ΠY	□N		
Are the	ere adequate	arrangen	nents 1	or lighting /temp	erature contr	ol?			ΠY	□N		
Is the v	enue accessi	ible (i.e., d	disable	d parking, access,	, and toilets) $\widehat{!}$	)			ΠY	□N		
Are em	nergency exit	s well ind	icated	?					ΠY	□N		
Is there	e appropriate	catering	arrang	gements in place f	or everyone?	? (Including drinki	ng water)		ΠY	□N		
Do you	have the red	quired eq	uipme	nt and resources t	to deliver the	course?			ΠY	□N		
Is all co	ourse equipm	nent in a s	atisfac	tory state and saf	fe to use?				ΠY	□N		
Have y	ou carried οι	ut (or revi	ewed)	the risk assessme	ent for the ve	nue to ensure the	safety of ev	veryone?	ΠY	□N		
Comm	ents – Includ	e here an	y infor	mation that futur	e users of the	venue / equipme	nt / resourc	es should consid	er.			

, ,	•	of Training the Course.					
VENUE (2) address:	IUE (2) address:						
Checklist completed on:		Ву:		Yes	No		
-	<u>-</u>	rse to be conducted in a Cov	vid Safe environment?	ПΥ	ПΥ		
Checklist completed on:  Is the size / layout of the venue adequate for the course to be conducted in a Covid Safe environment? (Including parking arrangements)  Are there adequate facilities/furniture for both large and small group activities?  Are there adequate arrangements for lighting /temperature control?  Is the venue accessible (i.e., disabled parking, access, and toilets)?  Are emergency exits well indicated?  Is there appropriate catering arrangements in place for everyone? (Including drinking water)  Do you have the required equipment and resources to deliver the course?  Is all course equipment in a satisfactory state and safe to use?				$\square$ Y	□N		
Are there adequate arrangements for lighting /temperature control?							
Is the venue accessible (i.e., disabled parking, access, and toilets)?					□N		
					□N		
Is there appropriate catering arrangements in place for everyone? (Including drinking water)							
Do you have the required equipment and resources to deliver the course?							
Is all course equipment in a satisfactory state and safe to use?							
Have you carried out (or revie	ewed) the risk assessme	nt for the venue to ensure t	he safety of everyone?	ПΥ	□N		
Comments – Include here any	y information that future	users of the venue / equipn	nent / resources should conside	r.			

Remember to inform the Club/Branch Safety Officer or a member of the Club/Branch Management Committee if any significant hazard(s) are identified that need addressing.

Joining	g Instructions and Co	urse Plans								
Check	off each point individ	ually <b>OR</b> confirm at the end that you	u have covered this informa	tion.						
	Emergency	What is the emergency evacuation	•							
	Procedures	Where are the fire exits, assembly	•							
	Facilities		•	located?						
		-								
	Course Overview	What will participants learn? (See	learning outcomes)							
	Course Outcomes What nationally recognised qualification/unit(s) of competency does the course align to (if any)? What patrol and job functions can the course lead to?									
		How long will the course take to c	omplete?							
	Course Duration	· -								
		_	venue and where are they located?  course session plans) learning outcomes) learning outcomes) learning outcomes) learning outcomes) learning outcomes lead to? learning to (if any)? the course lead to? learning outcomes lead to? learning to (if any)? learning to (							
	E.g., toilets, kitchen, first aid room.  Course Overview  What topics will be covered? (See course session plans) What will participants learn? (See learning outcomes)  What mationally recognised qualification/unit(s) of competency does the course align to (if any)? What patrol and job functions can the course lead to?  How long will the course take to complete? How many and how long are the breaks? What additional training sessions may be required? When will the assessment(s) occur?  What kind of training will be involved? (See course session plans) E.g., face-to-face activities, online learning, workbook activities, practical activities. What online and offline training tools are available?  Assessment Methods E.g., practical demonstration of skills, written paper, oral questioning.  Participant Feedback Opportunities  Participants can provide feedback any time Each participant should complete the Participant Evaluation Form at the end of their course.  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information was covered at the start of the course  Check here to confirm that all the above information									
	_	E.g., face-to-face activities, online	learning, workbook activitie	es, practical activities.						
		What online and offline training to	ools are available?		sthe course align to (if any)?  ctical activities.  ide)  3.  the end of their course.  irse  sper participant) r participant) e per participant) e per participant)  es					
	Methods E.g., practical demonstration of skills, written paper, oral questioning.									
		Each participant should complete	the Participant Evaluation F	Form at the end of the	eir course.					
	Check here to confi	irm that all the above information v	was covered at the start of	the course						
Post-C	ourse Checklist									
☐ Train	ing Course Report									
	•	, , , , ,								
	•									
		m (for any participant NYC)		<u> </u>	nt)					
vviiat	went wen:		What could have been be	tter:						
Partici	pant Exits									
Did an	y participants leave th	ne course early?		□ Yes	□ No					
If yes,	what was the reason?	?								
What o	did they exit with?									
_	uscitation/HLTAID009, Rad cue Certificate	dio Operator/PUAOPE013, HLTAID010,								
Reaso	nable Adjustments			1	1					
Were a	any reasonable adjust	ments (including extensions for any	assessments) made?	☐ Yes	□ No					
		participant enrolled into the course, rt scenarios in the course?	was an additional person	☐ Yes	□ No					
Partici	pant Full Name(s):			Assessment Task No	0.					
Adjust	ments made:									

Final sign off by Traine	r, Assessor or Facilitator (TAF)								
Before forwarding this per the current Educati	<i>Training Course Report</i> to the Branch Diron SOPs):	ector o	f Educati	on, please ensure tl	he following are attached (as				
<ol> <li>A copy of the Participant Joining Instructions</li> <li>Any other course advertisements e.g., social media sent to participants</li> <li>Training Enrolment Forms for each participant</li> <li>Assessment Portfolios for each participant</li> <li>Participant Evaluation Forms for each participant</li> <li>Assessment Feedback Forms for any participant deemed NYC in any element</li> <li>Record of Supervision Forms (if required)</li> <li>Risk Assessment and/or Hazard Reports (if they were required and if they haven't already been submitted)</li> <li>Your Branch may also require you to provide them with a copy of:</li> </ol>									
-									
Assessment Request Form (Form 14 print out from SurfGuard)									
Name		TAF							
Date		Signat	ture						
For completion by Bran	nch Director of Education (Branch DoE)								
_	urse Report and the Participant Evaluati natters that require yours, or Surf Life Sa		-		and evaluation of the course				
Feedback and overall e	valuation of course:								
Any additional areas re	quiring attention (include timescales for	comple	etion):						
Check one of the follow	ving: $\square$ All participants competent $\square$ As	sessme	nt Feedb	ack Record(s) attacl	hed (for NYC identified)				
Risk Assessment comp	eted (for every training session)								
☐ Yes (for every training	ng session)								
☐ Hazards recorded or	SLSC Risk Register and actioned as requ	iired							
Risk Assessment must incl	ude any injuries reported, any near misses, 0	Club Risk	and Haza	rd Register updated					
Name		Branc	h DoE						
Date		Signat	ture						
☐ Report reviewed by	Branch Director of Education		Date						

## COURSE ATTENDANCE RECORD: The attendance record must completed and submitted as part of the Training Course Report.

If you require more space, please include another copy of the second page of this course attendance record with your completed Training Course Report.

Course:			DATE(s) & TOPIC(s)									
Club/Organisation:												
SurfGuard Assessment ID#:												
Start Date:												
PARTICIPANT NAME	CLUB	COMMENTS										
Fick to confirm that venue checklist has been revisited and reviewed before each session												

Attendance Record Continued											
PARTICIPANT NAME	CLUB	COMMENTS									