SEG Awards Level 2

Award in Motor Vehicle Studies

 (Light Vehicle Pathway)

**Practical Evidence Record**

|  |  |
| --- | --- |
| **Learners Name** |  |
| **SEG Awards Registration Number** |  |
| **Centre Name** |  |
| **Assessor 1 Name**  |  |
| **Assessor 2 Name**  |  |
| **Assessor 3 Name**  |  |
| **Assessor 4 Name**  |  |

**DECLARATION OF AUTHENTICITY**

This declaration must be completed and signed by the learner and countersigned by the tutor / assessor and covers all evidence submitted for moderation.

|  |  |
| --- | --- |
| Learner Name |  |
| Unique Learner Number (ULN) |  | SEGLearner Reg. ID |  |
| Qualification Title |  |
| Centre Name |  |

# Learner statement of authenticity

**Before signing please read the guidance below**.

I confirm, that the attached assignment / portfolio is all my own work[[1]](#footnote-1) and does not include any work completed by anyone other than myself. I have completed the assignment / portfolio in accordance with SEG Awards’ instructions and within the time limits set by my centre.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |

# Centre confirmation of authenticity

On behalf of …………………………………….(insert centre name), I confirm that the above mentioned learner, to the best of my knowledge, is the sole author of the completed assignment / portfolio attached, and the assessments have been completed under the required conditions.

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date |  |
| Name |  |
| Title |  |

**Guidance for Learners**

You have been asked to sign this Declaration of Authenticity and place it at the front of your portfolio or course work assessment. It confirms that the work you have submitted for assessment is your own and that you have not copied it from someone else or allowed another learner to copy it from you.

When preparing any course work it is good practice to undertake research using information from published sources. If you quote directly from these sources then this must be indicated in your work by using quotation marks and referencing the document from which the quotation was taken. You must then comment in your own words on any ideas expressed.

Assessors, internal verifiers and SEG Awards’ external moderators and verifiers are subject specialists who can spot the use of published materials that may be passed as your own words or ideas.

If you do copy words from a published source and do not indicate their reference you will be committing plagiarism. This is considered a form of cheating and may result in your assessment being declared void.

**UNIT TRACKING SHEET**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Unit No.** | **Unit Title** | **Units****Selected**✔ | **Internal moderator** **Signature** **(If Sampled)** | **External moderator****Signature** **(If Sampled)** |
| **H/501/7005** | **Health and safety for Motor Vehicle Studies**  | ✔ |  |  |
| **A/601/3889**  | **Skills in inspecting light vehicles using prescribed methods** |  |  |  |
| **D/601/6753** | **Skills in inspection and repair of light vehicle clutches** |  |  |  |
| **A/601/6842** | **Skills in inspection and replacement of light vehicle exhaust components** |  |  |  |
| **K/601/8179** | **Skills in inspection testing and replacement of vehicle batteries and related components** |  |  |  |
| **F/601/6857** | **Skills in inspection and replacement of light vehicle suspension dampers and springs** |  |  |  |
| **L/601/6862** | **Skills in inspection and replacement of light vehicle braking systems and components** |  |  |  |

|  |
| --- |
| **H/501/7005 Health and Safety for Motor Vehicle Studies** **(Mandatory Unit)** |

**Assessment Guidance**

This unit is about following Health and Safety guidelines in a motor vehicle workshop.

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Using appropriate personal PPE |  |
| Using appropriate safety equipment |  |
| Demonstrate good housekeeping routines |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Correct waste disposal |  |
| Safe manual handling |  |
| Identify types and location of fire extinguishers |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **A/601/3889 Skills in Inspecting Light Vehicles using Prescribed Methods****(Option Unit)** |

**Assessment Guidance**

This unit is about carrying out various inspections of vehicles in a motor vehicle workshop

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Pre and post work |  |
| **Plus Any 1 from** |
| Pre purchase |  |
| Pre-MOT test |  |
| Safety |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection procedures |  |
| Apply legal requirements |  |
| Record information and make suitable recommendations |  |
| Produce appropriate work records |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **D/601/6753 Skills in Inspection and Repair of Light Vehicle Clutches****(Option Unit)** |

**Assessment Guidance**

This unit is about inspecting and repairing vehicle clutches and operating systems in a motor vehicle workshop

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Inspect and replace complete clutch |  |
| Inspect and replace clutch operating system component |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection and replacement procedures |  |
| Record information and make suitable recommendations |  |
| Produce appropriate work records |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **A/601/6842 Skills in Inspection and Replacement of Light Vehicle Exhaust Components (Option Unit)** |

**Assessment Guidance**

This unit is about the inspection and replacement of vehicle exhaust systems in a motor vehicle workshop

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Inspect exhaust system |  |
| Replace complete exhaust system |  |
| **Plus Replace 1 from** |
| Mid-system silencer |  |
| Catalytic converter |  |
| Lambda sensor |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection procedures |  |
| Record information and make suitable cost effective recommendations |  |
| Produce appropriate work records |  |
| Ensure correct fitment, alignment and no leakage |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **K/601/8179 Skills in Inspection, Testing and Replacement of Vehicle Batteries and Related Components (Option Unit)** |

**Assessment Guidance**

This unit is about inspecting, testing and replacing vehicle batteries in a motor vehicle workshop

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Test battery condition |  |
| Remove and replace vehicle battery |  |
| Check charging system |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection procedures |  |
| Record information and make suitable cost effective recommendations |  |
| Produce appropriate work records |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **F/601/6857 Skills in Inspection and Replacement of Light Vehicle Suspension Dampers and Springs (Option Unit)** |

**Assessment Guidance**

This unit is about inspecting and replacing vehicle suspension dampers in a motor vehicle workshop.

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Inspect suspension damper |  |
| Replace suspension damper and spring |  |
| Check wheel alignment  |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection procedures |  |
| Record information and make suitable cost effective recommendations |  |
| Produce appropriate work records |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

|  |
| --- |
| **L/601/6862 Skills in Inspection and Replacement of Light Vehicle Braking Systems and Components (Option Unit)** |

**Assessment Guidance**

This unit is about inspection and replacement of braking system components in a motor vehicle workshop

The evidence should be observed by an approved assessor or other qualified person

|  |
| --- |
| **Practical Task Log** |
| **Recommended Practical Tasks** | **Evidence Ref** |
| Inspect braking system |  |
| Replace disc pads |  |
| Replace drum brake component |  |
| Replace hydraulic system component |  |
| Bleed braking system |  |
| Test braking system operation |  |
|  |
| **Knowledge Assessment** |  |

To fully meet the unit requirements, the following items need to be referenced below. The evidence can be generated in this or other units.

|  |  |
| --- | --- |
| **Assessment Criteria** | **Evidence Ref** |
| Use personal PPE |  |
| Use appropriate vehicle coverings |  |
| Select and use technical data |  |
| Use correct inspection procedures |  |
| Record information and make suitable cost effective recommendations |  |
| Produce appropriate work records |  |

|  |
| --- |
| **Assessor Declaration** |
| In signing this sheet the assessor confirms that all the operations in this task were carried out by the named learner and the learner observed safe working practices at all times.Assessor Name (Please Print)……...……………………………………………............Date……………………Assessor Signature ………………………………………………….....Date…………………… |

1. Unless otherwise stated e.g. for some entry level qualifications, learners can work together but should identify sections which are their own work. [↑](#footnote-ref-1)