## **TOOLS AND EQUIPMENT CHECKLIST**

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| --- | --- |
| **Qualification Title** |  |
| **QAN[[1]](#footnote-1)** |  |
| **Unit No. / AC[[2]](#footnote-2)** |  |

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| --- | --- | --- | --- |
| **Tool / Equipment** | **Number issued** | **Number returned** | **Comments and actions** |
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| Issued and received back in clean safe working condition | | | |
| Learner’s signature |  | Date |  |
| **Checked by** |  | Date |  |
| **Assessor signature** |  | Date |  |
| Internal Moderator / Quality Assurer signature (if sampled) |  | Date |  |

1. Regulatory qualification number [↑](#footnote-ref-1)
2. Assessment criteria reference [↑](#footnote-ref-2)