## **Witness Statement**

# **ROV System Auditor**



Verification of competence, education and training

Candidate Name:		
Date of birth:		
Cai	ndidate email:	
l co	onfirm that the person deta	d above:
1	Has been employed by	(company name)
2	At the position of	
	Between the dates of	and
3	Totalling approximately	offshore days
4		n holds a valid and authentic academic/trade qualification (where applicable) for the mployed (please provide copies of certificates).
5	accordance with IMCA gu	emonstrated the skills necessary to be deemed competent at the above grade in elines (if applicable) and within MTCS Competencies (listed on sheet 2). I would d that they be assessed for the grade (please provide copies of recent iews).
6	The person has a valid off provide copies of certifica	ore medical and survival suitable for the geographical area in which they work (please 5).
Wi	tness name:	Position:
Witness signature:		Date:
Witness email:		Witness contact no:
Co	mpany name / address:	
MTCS (UK) Ltd		Tel: +44 (0)15394 40200
Email: enquiries@mtcs.info		<u>www.mtcsuk.com</u>

# **ROV System Auditor**



#### **Job Summary:**

An ROV Auditor is regarded as someone who is fully conversant with to process of auditing equipment in the Offshore Industry

### **Entry Level Specifications:**

- Completed appropriate Auditing Training in acordance with IMCA R006
- Holds a Valid Certificate of Competence at ROV Supervisor or above OR Demonstrates experience of Previous Audits within the last 12 months

### **Competencies:**

- 1) Demonstrate the ability to audit ROV systems
- 2) Demonstrate the ability to complete an audit report