



EVALUATION CHECKLIST FOR THE ACCREDITATION OF PRACTICAL ASSESSMENT CENTER

Name of Company or Corporation:	Contact Number:	Company Address:
Date & Time Commenced of Inspection:	Date & Time Completed Inspection:	
Company E-mail :	MARINA Control Number:	
Date of Initial Inspection	Date of Final Inspection	

Item No.	Key Areas of Evaluation	Applicant Self Evaluation $(\sqrt[4]{})$	Evaluator Verification (√)	Remarks
1. GE	NERAL REQUIREMENTS			
.1	Quality Standard System (ISO Accreditation is optional)			
.2	Letter of Intent			
.3	Business Permit			
.4	SEC registration and Articles of Incorporation or DTI registration for single proprietorship			
.5	Poster of Contact details of MARINA for reporting to non-compliant and prohibited acts			
.6	Simulator documentation and certificates - Full mission GMDSS simulator certified as Class " A" - Simulators proof of purchase or certificate of ownership - Name of Classification Society			





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.7	Verify the number of work stations corresponding to the Certificate Of Ownership - Simulator Configuration: Instructor Station = Work Stations = **minimum of 1 Instructor Station and 5 Work Stations	
.8	Submission of at least 6 scenarios each competence in USB / External Hard Disk or other means of storage (*Scenarios must be not be password protected or not encrypted to enable verification and further review by MARINA **AC should submit 6 scenarios. ***AC failing to meet the minimum required scenarios will be subjected to discontinuance of application until scenarios are completed.	





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2. ASS	ESSORS QUALIFICATION			
.1	Must be a Marine Officer or Radio Operator			
.2	Must be a holder of a valid GMDSS Operator Certificate			
.3	Completed the assessment , examination and certification of seafarers (IMO Model Course 3.12)			
.4 -	Completed the assessment , examination and certification of seafarers (IMO Model Course 6.10)			
.5	Must have relevant experience on board GMDSS vessel plying international voyage for at least one (1) year in total for the preceding (5) years prior to his employment as Assessor			
.6	Certificate in Operational Use of Simulator Provided by the Manufacturer			
.7	Certificate of accreditation as GMDSS Assessor by MARINA			

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3. PO	STERS, PUBLICATIONS AND MANUALS			
.1	STCW Convention including 2010 Manila Amendments			
.2	Assessment manuals and procedures			
.3	Updated MARINA STCW Circulars			
.4	Simulator Operators Manual (Hard Copy)			





MARITIME INDUSTRY AUTHORITY (GMDSS) ANNEX 1

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4. EQU	JIPMENT (not limited to the following:)			
.1	GMDSS Simulator- Monitors of at least 19" LCD / LED			
.2	Printer / Photo Copier/Scanner			
.3 .	Real-time Audio and Video Monitoring System and Facilities - ACs must provide appropriate installation of real-time audio and video monitoring technology that can be accessed remotely by MARINA at any given time in accordance with the provisions of paragraph 7.3.1.4 of the IRR of RA 10635. Archives must be properly labelled and kept for at least 2 years			
.4	Playback System with LCD / LED or Projector for the Briefing / De-Briefing Room			

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5. FA (CILITIES			
.1	Administrative Area / Registration Area / Record Section			
.2	Assessor's / IT Area			
.3	Reception / Waiting Area			
.4	Briefing / Debriefing Room			
.5	Simulator Room			
.6	Comfort Room			





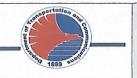
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6. SIM	JLATOR EQUIPMENT AND FACILITIES			
6.1 FULL MISSION GMDSS SIMULATOR A full mission simulator capable of simulating all radio communication systems in the GMDSS frame-work applicable for a GOC certificate and SAR operation.				
The simulator shall be capable of simulating a realistic environment for all of the applicable STCW competence requirements referred to in the column for Class A in Table B1.				
	Work Station:			
.1	.1 A full mission GMDSS simulator with original license / dongle / machine license.			
	.2 Number of GMDSS simulator work stations			
.2	Instructor/assessor console - Should be separate but adjacent to work stations			<i>/</i>
.3	Briefing/De-briefing room			
.4	Procedures for formulation / validation by AC is clearly stated in the QMS Manual			



X- FINDINGS: Please use Annex 5

REPUBLIC OF THE PHILIPPINES DEPARTMENT OF TRANSPORTATION



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EVALUATED BY:		
Signature Over Printed Name Team Leader	Signature Over Printed Name BOMDO / BOMEO	Signature Over Printed Name BOMDO / BOMEO
Team Members:		
(Signature Over Printed Name)	(Signature Over Printed Name)	(Signature Over Printed Name)
	CONFORME:	
	Signature Over Printed Name Company Representative	