*Cameby Downs Mine – Site Induction Authorisation Form*

***Section 1 – To be completed by Contractor***

Please complete Section 1 and forward this form to the authorised CDM Contract Administrator/Representative for signing. If this form is not completed prior to the induction, participants cannot undertake training.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Inductee Full Name:*** | |  | | | | |
|  |  | |  |  |  |  |
| ***Company Name:*** | |  | | | | |
| ***Induction required***  CDM Site Induction  ***Current CDM Induction Status:***  Refresher Training - Date of last Induction - \_\_\_\_/\_\_\_\_/\_\_\_\_\_  New to Site Training | | | | | | |

***Section 2 – To be completed by CDM Contract Administrator / Representative***

|  |  |  |
| --- | --- | --- |
| *I give permission for the above named to undertake induction training at Yarrabee and to perform tasks and operate equipment only once authorised by the SSE or SSE Delegate.*  ***Reason for attending site:*** | | |
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|  |  |  |
|  |  |  |
| ***CDM Contract Administrator/Representative Name*** |  | ***Signature*** |
|  |  |  |
| ***Department/Position*** |  | ***Date*** |