

**Attachment 005 to Appendix R:  
Aviation Security Training Audit/Inspection Report Checklist**

CASSOA LOGO	CASSOA <b>MODEL CHECKLIST:</b>  <b>AVIATION SECURITY TRAINING AUDIT/INSPECTION REPORT CHECKLIST CASSOA- CL- 005</b>	Revision: 0
Document No:..... CL/005/2017.....	Title: <b>Aviation Security Training Security Audit/Inspection Report Checklist</b>	
	FULL NAME OF INSTRUCTOR(S)	
	TRAINING ORGANISATION	
	ADDRESS: FAX: TEL. NO: EMAIL:	
	DATE(S) OF INSPECTION	
	COURSE NAME	
	AUDIT TEAM  1.TEAM LEADER:  2.TEAM MEMBER(S):	
	TIME	Inspection Commenced at:
		Inspection Ended at:

Assessment Code:

**Category 1:** Meets a regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. Recommendations may be made to further enhance measures or to address any problems linked to the quality of implementation.

**Category 2:** Does not meet a regulatory requirement of the Civil Aviation Security Regulations, 2015 or provision of the NCASP. A category 2 item represents a minor need for improvement for compliance to be achieved. In this case, improvement is necessary to ensure proper implementation of this regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP and action should be taken by the Operator.

**Category 3:** Does not meet a regulatory requirement of the Civil Aviation Security Regulations, 2015 or provision of the NCASP. A category 3 item represents a serious need for improvement for compliance to be achieved. In this case, improvement is essential to correct the deficiencies and to comply with the regulatory requirement of the Civil Aviation Security Regulations, 2016 or provision of the NCASP. The Operator should give high priority to corrective action.

Not confirmed (N/C).

Not applicable (N/A).

	Items	Assessment					OBSERVATION
		Cat 1	Cat 2	Cat 3	N/C	N/A	
1	Venue, space and class setup commensurate to the number of participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2	Content of relevant Training Package in line with the NCASTP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3	Availability of relevant Lesson Plans and its effective use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	Items	Assessment					OBSERVATION
		Cat 1	Cat 2	Cat 3	N/C	N/A	
4	Course Organization Materials a) <i>Attendance Registers,</i> b) <i>Registration forms,</i> c) <i>Course appraisal forms</i> d) <i>Timetable</i> e) <i>Examination/Test registration forms</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5	Presentation a) Encouraging trainees Involvement b) Reinforcing trainees responses and responds appropriately to trainees questions and comments c) Demonstrating effective questioning techniques d) Establishing confident, relaxed but controlled learning environment e) Time management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6	Availability of relevant Teaching Aids( <i>projector, Computers, Flip chats, Marker pens, Video CDs if appropriate, etc</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Availability of relevant Subject matter Course Materials ( <i>Course hand outs , Slides, relevant ICAO documents, National documentation, Local documentation where appropriate, etc</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7	Availability of class continuous assessment and/ or Final assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	Items	Assessment					OBSERVATION
		Cat 1	Cat 2	Cat 3	N/C	N/A	
8	Integrity of administration of tests/ examinations and adhering to minimum pass marks set out in the NCASTP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9	Issue of certificates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<b>After oversight (before leaving the venue), shortcomings communicated to the Instructor(s) .....</b>						
	<b>Recommendation(s)</b>						
	Inspector's Signature ..... Date.....						