Date

| Reference No. | | | | | | | | | | | | | | | |
|--|---------------------------|--------|-------|--------|-------|------|-------|-------|-------|-------|-------|-------|------|----|----|
| SELF-ASSESSMENT GUIDE | | | | | | | | | | | | | | | |
| Qualification RUBBER PRODUCTION NC II | | | | | | | | | | | | | | | |
| Certificate of Competency (COC 3) | Perform Budding Operation | | | | | | | | | | | | | | |
| Instruction: Read each q answer. | uestic | n and | d che | eck t | he a | appr | opria | ate o | colur | mn t | o inc | dicat | e yo | ur | |
| Can I? | | | | | | | | | | | | , | YES | N | 10 |
| Perform Preparatory Activities | | | | | | | | | | | | | | | |
| Identify appropriate tools and materials in accordance with the job requirement*. | | | | | | | | | | b | | | | | |
| Prepare tools and materials by sharpening of budding knife | | | | | | | | | | | | | | | |
| Slice budding tape in accordance to required size * | | | | | | | | | | | | | | | |
| Secure Budstick | | | | | | | | | | | | | | | |
| Select quality budstick | oased | on ir | ndus | try s | tanc | dard | 3 | | | | | | | | |
| Apply techniques in ha | rvesti | ng bu | dstic | ck, fo | ollov | ving | indu | ıstry | sta | nda | rds * | | | | |
| Pack harvested budstice | ks ac | cordir | ng to | esta | ablis | hed | ind | ustry | / pra | actic | e * | | | | |
| Demonstrate handling industry practices * | and | haulir | ng o | f bu | ıdsti | cks | follo | win | g e | stab | lishe | ed | | | |
| Perform Actual Budding | | | | | | | | | | | | | | | |
| Select seedling rootsto the industry practices. | ocks f | or bu | ddin | g is | cond | duct | ed ir | n ac | cord | lanc | e wit | th | | | |
| Perform actual budding according to established procedure * | | | | | | | | | | | | | | | |
| Open budded rootstock to determine correcting budding procedure | | | | | | | | | | | | | | | |
| Perform rebudding based on industry practice, if needed | | | | | | | | | | | | | | | |
| Perform cutback of budded seedlings based on industry practice * | | | | | | | | | | | | | | | |
| Mark/label and records bud grafted rubber seedlings * | | | | | | | | | | | | | | | |
| Practice safety precaution OSH standards * | ns in | perf | orm | ing a | all t | asks | s in | асс | orda | ance | e wit | h | | | |
| I agree to undertake assessment with the knowledge that information gathered will only be used for professional development purposes and can only be accessed by concerned assessment personnel and my manager/supervisor. | | | | | | | | | | | | | | | |
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Candidate's Name and Signature