Eyesight Test Certificate
(please turn over for ‘Eyesight test criteria’)

This form is to be completed by all applicants for a Certificate of Competency in the presence of a duly qualified Optometrist, Eye Specialist or Medical Practitioner conducting the test.

Personal details:
Full name (print name): ________________________________ Proof of identity sighted: __________________
Date of birth: __________________________ Place of birth: __________________

Residential address:
Number: __________________________ Street: __________________
Town / suburb: __________________________ State: __________________________ Postcode: __________

Contact details:
Phone (business): __________________________ Phone (home): __________________________ Mobile: __________________________

Eye Test Certificate (This part to be completed by the Optometrist or Ophthalmologist)

<table>
<thead>
<tr>
<th>Letter test (indicate standard of each eye)</th>
<th>NS Chart (Pass or Fail)</th>
<th>Colour Vision (number of colour plates correctly identified)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Without aids to vision</td>
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<td>Right:</td>
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<td>With aids to vision (if applicable)</td>
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<td>Right:</td>
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</tbody>
</table>

Eyesight test results (for optometrist, also read as ophthalmologist)
(See notes and eyesight test criteria overleaf)

Defects in vision (if any): __________________________
Signed (Optometrist): __________________________ Date: __________________________
Name of optometrist: __________________________ Registration number: __________
Address of optometrist: __________________________ Postcode: __________
Telephone: __________________________ Mobile: __________________________ Facsimile: __________________________
Eyesight test criteria
Vision tests shall be conducted by a suitably qualified optometrist, eye specialist or medical practitioner

Use of aids to vision
A person whose eyesight test certificate indicates that an aid to vision was used for the purpose of being found medically fit shall, at all times when on duty on a vessel, use such aid when appropriate and keep a spare aid to vision available.

Eyesight vision test
Candidates should achieve the standards listed below:

With or without aids to vision:
Snellen principle 6/6 (0.0 LogMar) in the better eye (except for Engine Crew where 6/9 is acceptable); and
Snellen principle 6/9 (0.2 LogMar) in the other eye.

Without aids to vision:
Snellen principle 6/60 (1.0 LogMar) in each eye.

N5 card test
With or without aids to vision N5 card is to be read correctly at a distance 300mm – 500mm off.

Colour vision test
Applicants are required to demonstrate that they have passed one of the following:
1. The Ishihara test. A candidate shall correctly identify at least 13 of the first 15 plates in a 24 plate version; or

Colour vision testing is not required for:
• Issue of a Certificate of Competency as Marine Engine Driver Grade 3 or Grade 2.

Monocular Vision
• Persons with only one eye or poor vision in one eye (ie monocular vision) may be issued with a Certificate of Competency if the qualified person conducting the eyesight test provides a statement that the person can undertake the normal duties the holder of the certificate would be expected to perform and that the safe operation of the vessel will not be affected.
• Persons with monocular vision and those employing persons with monocular vision need to be aware that monocular vision may limit depth perception and impact safety.

Period of Currency
• The period of validity for an eyesight test certificate should not exceed one year.