



Knowledge Test Answer Sheet

Surname _____ Date of Birth _____

Given Names _____ ID Licence No: _____

Postal Address: _____ Expiry Date: _____

Postcode _____ Contact Ph No: _____

Email Address _____

"Under the Privacy Act, the individual's registration details stated on this form will only be used for issuing a training certificate for the purpose of applying for a Victorian Recreational Boating Licence."

Please sign below if you authorise CTI to give MSV your contact number for training feedback purposes.

Knowledge Test (Circle the correct answer)

Signature _____

1	A	B	C	(Example)
---	---	---	---	-----------

Recreational Boat Operator - Knowledge Test				
1	A	B	C	
2	A	B	C	
3	A	B	C	
4	A	B	C	
5	A	B	C	
6	A	B	C	
7	A	B	C	
8	A	B	C	
9	A	B	C	
10	A	B	C	
11	A	B	C	
12	A	B	C	
13	A	B	C	
14	A	B	C	
15	A	B	C	
16	A	B	C	
17	A	B	C	
18	A	B	C	
19	A	B	C	
20	A	B	C	
21	A	B	C	
22	A	B	C	
23	A	B	C	
24	A	B	C	
25	A	B	C	
26	A	B	C	
27	A	B	C	
28	A	B	C	
29	A	B	C	
30	A	B	C	

Personal Water Craft				
1	A	B	C	
2	A	B	C	
3	A	B	C	
4	A	B	C	
5	A	B	C	
6	A	B	C	
7	A	B	C	
8	A	B	C	
9	A	B	C	
10	A	B	C	
11	A	B	C	
12	A	B	C	
13	A	B	C	
14	A	B	C	
15	A	B	C	

Recreational Boat Operator Score	/ 30
----------------------------------	------

Minimum required pass rate 26/30

Personal Water Craft Score	/ 15
----------------------------	------

Minimum required pass rate 13/15

Assessor Name: _____

Assessor Signature _____