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| **ASSESSMENT RECORD SHEET** | | | | |
| **Programme Title** | | [Programme Title] | **Learner Registration Number** | [Learner Registration Number] |
| **Learner Name** | [Learner Name] |
| **Assignment Title** | | [Assignment Title] | **Assessor Name** | [Assessor Name] |
| **Unit or Component Number and Title** | | [Unit/Component Number and Title] | **Targeted Learning Aims/Assessment Criteria** | [Targeted Learning Aims/Assessment Criteria (Initial)] |
| **First Submission** | | | | |
| **Deadline** | | [First Submission - Deadline] | **Date Submitted** | [First Submission - Date Submitted] |
| **Has an extension to the deadline been approved by the Assessor due to extenuating circumstances?** | | | | [Extension Approved (Y/N)] |
| **Targeted criteria** | **Criteria achieved** | **Assessment comments** | | |
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| **General comments** | | | | |
| [Initial - General Comments] | | | | |
| **Learner Declaration** | | I certify that the evidence submitted for this assignment is my own. I have clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Learner signature** | | [Initial - Learner Signature (Name or File Path)] | **Date** | [Initial - Learner Declaration Date] |
| **Assessor declaration** | | I certify that to the best of my knowledge the evidence submitted for this assignment is the learner’s own. The learner has clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Assessor signature** | | [Initial - Assessor Signature (Name or File Path)] | **Date** | [Initial - Assessor Declaration Date] |
| **Date of feedback to learner –** this must be within a timely period of the assessment taking place | | | | [Initial - Date of Feedback to Learner] |
| **Resubmission authorisation**  by Lead Internal Verifier**\*** | | [Resubmission - Authorised by Lead Internal Verifier (Name)] | **Date** | [Resubmission - Authorisation Date] |
| \* All resubmissions must be authorised by the **Lead Internal Verifier**. Only **one** resubmission is possible per assignment, providing:   * The learner has met initial deadlines set in the assignment, or has met an agreed deadline extension. * The tutor considers that the learner will be able to provide improved evidence without further guidance. * Evidence submitted for assessment has been authenticated and accompanied by a signed and dated declaration of authenticity by the learner.   \*\*Any resubmission evidence **must** be submitted within 15 working days of learners receiving assessment feedback which must be within a timely period of the assessment taking place. | | | | |

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| **Resubmission** | | | | |
| **Deadline** | | [Resubmission - Deadline] | **Date submitted** | [Resubmission - Date Submitted] |
| **Targeted criteria** | **Criteria achieved** | **Assessment comments** | | |
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| **General comments** | | | | |
| [Resubmission - General Comments] | | | | |
| **Learner Declaration** | | I certify that the evidence submitted for this assignment is my own. I have clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Learner signature** | | [Resubmission - Learner Signature (Name or File Path)] | **Date** | [Resubmission - Learner Declaration Date] |
| **Assessor declaration** | | I certify that to the best of my knowledge the evidence submitted for this assignment is the learner’s own. The learner has clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Assessor signature** | | [Resubmission - Assessor Signature (Name or File Path)] | **Date** | [Resubmission – Assessor Declaration Date] |
| **Date of feedback to learner** | | | | [Resubmission – Date of Feedback to Learner] |

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| **ASSESSMENT RECORD SHEET** | | | | |
| **Programme Title** | | [Programme Title] | **Learner Name** | [Learner Name] |
| **Assignment Title** | | [Assignment Title] | **Assessor Name** | [Assessor Name] |
| **Unit or Component Number and Title** | | [Unit/Component Number and Title] | **Targeted Learning Aims/Assessment Criteria** | [Targeted Learning Aims/Assessment Criteria (Initial)] |
| **Retake** | | | | |
| **Deadline** | | [Retake - Deadline] | **Date submitted** | [Retake - Date Submitted] |
| **Targeted Pass criteria** | **Criteria achieved** | **Assessment comments** | | |
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| **General comments** | | | | |
| [Retake - General Comments] | | | | |
| **Learner Declaration** | | I certify that the evidence submitted for this assignment is my own. I have clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Learner signature** | | [Retake - Learner Signature (Name or File Path)] | **Date** | [Retake - Learner Declaration Date] |
| **Assessor declaration** | | I certify that to the best of my knowledge the evidence submitted for this assignment is the learner’s own. The learner has clearly referenced any sources used in the work. I understand that false declaration is a form of malpractice. | | |
| **Assessor signature** | | [Retake - Assessor Signature (Name or File Path)] | **Date** | [Retake - Assessor Declaration Date] |
| **Date of feedback to learner** | | | | [Retake - Date of Feedback to Learner] |