

Assessor Reference Request Form

Please complete the details below.

Name of Applicant

Task and subject applied for

This person has made an application to undertake assessment tasks for OCR and has nominated you as a referee.

Please complete this form within 5 days of receipt and return to assessor.recruitment@ocr.org.uk

You can view the task descriptor and essential criteria for the above task at www.ocr.org.uk/assessor

Referee's Name

Referee's Position

Referee's email address

How long have you known the applicant and in what capacity?

Does the applicant:

1. Communicate effectively?

☐ YES

☐ NO

2. Have good time management skills?

☐ YES

☐ NO

3. Show a meticulous approach?

☐ YES

☐ NO

Please state how the applicant's qualifications, experience and knowledge are appropriate for this task.

In your opinion, has the applicant maintained his/her professional development in the specialist area for which they are applying?

☐ YES

☐ NO

If you are the applicant's principal employer: This task requires attendance at meetings which may involve absence from work. Are you willing for the applicant to be released for meeting days?

☐ YES

☐ NO

I certify that the information I have given is true and correct to the best of my knowledge.

☐

Referee Name

Date