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| **Employer Review** |

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| **Learner Name:** | **Mr. Tess La** | **Date:** | **26/09/2019** |
| **Employer/Workplace:** | **TEST** | **Programme Coordinator:** | **N/A** |
| **Course Start Date:** | **04/05/2018** | **Course End Date:** | **30/09/2019** |
| **Course Title:** | **QCF Level 5 Diploma - Adult Residential** | **Course Progress:** | **25 %** |

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| **Activities Completed by the Learner** | | | |
| **Activity Brief** | **Date** | **Activity Brief** | **Date** |
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| **Employer Assessment of the Apprentice Performance Since Commencing on Programme** | | | | |
| **Please rate the following:** | **Excellent** | **Good** | **Satisfactory** | **Requires Improvement** |
| **Able to support and lead staff** |  |  |  |  |
| **Able to promote improvements in service provision** |  |  |  |  |
| **Able to communicate effectively at all levels** |  |  |  |  |
| **Able to establish performance targets for self & service** |  |  |  |  |
| **Able to manage self and job priorities** |  |  |  |  |
| **Able to review and develop procedures & practices effectively** |  |  |  |  |
| **Able to build effective relationships with stakeholders** |  |  |  |  |

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| **Progress Review and Feedback** |
| **Programme Coordinator Comment** (please include comments regarding completion timescale, if not likely to be timely) |
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| **Employer Comment** (please include a rating on the quality of support/service provided by Access Skills) |
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| **Employer Signature:** |  | **Date:** |  |
| **Coordinator Signature:** |  | **Date:** |  |