III/15/09/01

**Competency Based Final Assessment Record Book – NVQ 1-4**

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Occupation/Sector:

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National Competency Standard Code:

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Candidate’s Name with Initials:

Address :

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Sex : Male Female

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Candidate’s NIC/Passport Number :

Training /Assessment Agency : …………………….……………………………………………………..

Name & Location of the

Training Centre : ………………..………………………………………………………….. *(State ‘RPL’ for RPL Candidates)*

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Assessment Centre : ……………………………….……………………………………………...…..

*(If not the Training Centre given above)*

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Date/s of Assessment :

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Assessor Details :

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| --- | --- | --- | --- |
| Name of the Assessor | Assessor  Registration Number | Specimen Signature | Short Signature |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

Awarded Qualifications :

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Qualification Code | | | | | | | | | | | | Version | Assessors’ Signature in Full | |
|  |  |  | **S** |  |  |  | **Q** |  |  |  |  |  |  |  |
|  |  |  | **S** |  |  |  | **Q** |  |  |  |  |  |  |  |
|  |  |  | **S** |  |  |  | **Q** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | Assessor’s Seal | | | |  |  |  |

*(This Record Book shall be kept with the Training Institute / Industry Establishment, who facilitated the Assessment.)*

**Assessment Record Sheet** National competency stand Code : …………..

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| Elements | **U01** | **U02** | **U03** | **U04** | **U05** | **U06** | **U07** | **U08** | **U09** | **U10** | **U11** | **U12** | **U13** | **U14** | **U15** |
| Whether the candidate has achieved the competency, C or N or A | | | | | | | | | | | | |  |  |
| Element 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Critical Aspects |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Underpinning Knowledge |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Evidence From |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Unit Result |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Assessors’ Short Signature |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**C - Competent N – Not yet Competent A – Absent**

Evidence may be collected using one or more of the following.

**WT =** Written Test, **PT =** Practical Test, **OW =** Observation at work Place, **OQ =** Oral questioning, **TR/LB =** Trainee’s Record/Log Book, **T =** Trainer report, **S =** Supervisor/team leader report, **C**=Certificates, **T**=Testimonies, **VD**= Video, **P**=Photographs, **PP**=Product Produced, **S**=Simulations, **FB**=Feed Back from Fellow Members, **CS**=Case Studies , **RP**=Role Play

**Assessment Record Sheet** National Competency Stand Code: ……………………………..

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Elements | **U16** | **U17** | **U18** | **U19** | **U20** | **U21** | **U22** | **U23** | **U24** | **U25** | **U26** | **U27** | **U28** | **U29** | **U30** |
| Whether the candidate has achieved the competency, C or N or A | | | | | | | | | | | | |  |  |
| Element 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Element 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Critical Aspects |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Underpinning Knowledge |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Evidence From |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Unit Result |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Assessors’ Short Signature |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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List of Document Attached to Support Gathered Evidence

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S/N | Unit No. | Type of Document | Description | Assessors’ Short Signature | |
|  |  |  |  |  |  |
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Feed back to candidate on overall performance:

**……………………………………………………………………………………………..………………………………………………………………………………………………………..…………………………………………………………………………………………………..**

**Achievement of Unit of Competence**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Unit No.** |  |  |  |  |  |  |  |  |
| **Date of Achievement** |  |  |  |  |  |  |  |  |
| **Assessor’s Short Signature** |  |  |  |  |  |  |  |  |
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| **Unit No.** |  |  |  |  |  |  |  |  |
| **Date of Achievement** |  |  |  |  |  |  |  |  |
| **Assessor’s Short Signature** |  |  |  |  |  |  |  |  |
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|  | **Candidate** | **Assessors** | |
| Name |  |  |  |
| Full Signature |  |  |  |
| Date : |  |  |  |

**For Institute use only**

Candidate’s Full Name : …………………………………………………………………….………………………..…

Centre : …………………………………………………………………..…….……… Batch : ………………………

Course Instructor : Name : ………………………………………………………. Signature :………………………...