

III/15/04/01

**TERTIARY AND VOCATIONAL EDUCATION COMMISSION (TVEC)**

**Details of Eligibility Interview**

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| This form should be filled on completion of an Eligibility Interview, signed by the Assessor(s) and submitted to Director in charge for the assessment of the institutes.  TVEC Reg. No.  Y  M  D  Date of Eligibility Interview  P{  /  Occupation/Sector ……………………………………………….  Name & Address of the Training Center National Competency Standard Code  ……………………………………..…………………………….. …………………………..………………………………………..  S  . |

1. **Information on candidates**

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| NUMBER OF CANDIDATES | | | |
| Summoned for Eligibility Interview : | Present for Eligibility Interview: | Suitable for Final Assessment : | Not yet suitable for Final Assessment : |

1. **Facilities required for Final Assessment**

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| Are adequate facilities available at the centre to conduct Final Assessment : **Yes/ No**  **If the answer is “No” indicate the arrangements made/to be made :** ……………………………………  ……………………………………………….…..……………………………………………………………..…...  ……………………………………………………………………………………………………..…..……………  ……………………………………………………………………………………………………………..………..  ………………………………………………………………………………………………………………………  Are tools, equipment and material required for the Final Assessments available : **Yes/ No**  **If the answer is “No”, Please list the items you request from the Head of the training Institute to be made available for the Final Assessment and also complete the “Tools and Equipment** **Shortage Form” that is available in the TVEC website and email to** [**rubasinghe@tvec.gov.lk**](mailto:rubasinghe@tvec.gov.lk)  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………………………………………  ………………………………………………………………………………………….…..………..………………  ……………………………………………………………………………………………..………..……………… |

1. **Final Assessment**

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| Date(s) fixed for the Final Assessment :  Arrangements made to inform the candidates of the date(s) for the Final Assessment :  ………………………………………………………………………………….…………………………………  ………………………………………………………………………………………………………………… |

1. **Comments of the Assessors (if any)**

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|  | Assessor 1 | Assessor 2 | Assessor 3 |
| Name |  |  |  |
| Assessor Reg. No. / Licence No |  |  |  |
| Signature |  |  |  |
| Date |  |  |  |

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| 1. **This should be signed by the Head of the Training centre or an officer designated by him :**   I certify that the Eligibility Interview for the candidates were carried out by the Assessors at this Training centre and arrangements required for the final assessments are noted for necessary action.  ……………………………….. …………………. ………………  Name & Designation Signature Date |