

Assessment Plan & Review/Feedback



Please complete form in block letters


please photocopy as necessary

Learner name _____

Assessor Name _____

C&G Unit number/s _____

This record can be used for single multiple unit planning. Remember that all planning should be SMART: Specific, Measurable, Achievable, Realistic and Time Bound.

Date action agreed	What has to be done \ What has been reviewed and the feedback / Record of judgement or outcome	Evidence reference number	Learner and Assessor Initials	Date to be done by / Date done
				

Signed by Learner _____ Date _____

Signed by Assessor _____ Date _____