Instruction for use: These instructions should be deleted from the completed assessment cover sheet.

This template is to be used by teaching sections to create an assessment Observation checklist for an assessment(s) conducted in the presence of an assessor. The completed Observation checklist must be signed by the student/s and retained by the teaching section.

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| **Faculty:** |  | **Campus:** |  |
| **Teaching section:** |  |
| **Qualification Number and Name:** |  |
| **Unit of Competency Number and Name:** |  |
| **Assessment Task:**  |  | **Duration:**(Hours and minutes) |  |
| **Assessment Date:** |  | **Location:** |  |

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| **Assessment instructions:**  delete or add dot points as required* Write your name and student number in the appropriate fields
* Do not use Pencil unless otherwise specified by the assessor (e.g. for technical drawings etc)
* This assessment must be completed within the allocated duration.
* Personal electronic devices (mobile phones / IPad) are not permitted.
* You will be observed performing skills by your teacher and assessed accordingly

**Assessment Criteria:*** List the performance criteria and performance evidence being assessed by **this** assessment task.
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**Resources to be supplied by students:** delete or add dot points as required

* Pen, pencil, eraser, ruler, toolkit, uniform, safety PPE, etc.

**Resources permitted during assessment:** delete or add dot points as required

* Standard Dictionaries
* Technical Dictionaries
* Bilingual Dictionaries
* Programmable Calculators
* Non-programmable Calculators

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| **Student Name:**  |  |
| **Student ID:**  |  | **Group:** |  |
| **Student signature:** |  | **Date:** |  |

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| **Performance criteria and performance evidence being observed** | **Y** | **N** | **Assessor comments** |
| 1. **Identify & insert performance criteria / performance evidence of assessment**
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| 1. **Identify & insert performance criteria / performance evidence of assessment**
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| 1. **Identify & insert performance criteria / performance evidence of assessment**
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| **Assessment Outcome:** | **🞏 [Satisfactory - S] 🞏 [Not Satisfactory - NS] 🞏 Resubmission (RS)**  |
| **Assessor’s comment regarding student performance** |
| Assessor’s comment should be specific and based on the marking criteria for the specific assessment event. |
| **Assessor’s recommendation on how to improve the performance (if there is any gap)** |
| Assessor’s comment should be specific and based on the marking criteria for the specific assessment event. |
| **Assessor Name/ Signature:** |  | **Date:** |  |
| **Student Feedback on Outcome(s):**🞏 The results of my performance have been discussed and explained to me.**If you would like to request a review of your results or if you have any concerns about your results, contact your teacher or head teacher.** |
| **Student’s signature:**  |  | **Date:** |  |