

**New Assessor Application  
 Assessment Observation and Declaration Form  
 (To be completed by sponsoring Assessment Centre only)**



Please complete all details in block capitals	
Applicants full name:	
Candidate Number:	
Home address:	
Home telephone number:	
Mobile number:	
Email address (please write this clearly): <b>This section <u>must</u> be completed</b>	

Please state which City & Guilds qualification they wish to be an Assessor for:

Please attach a copy of the relevant First Aid certificate:	
Full First Aid at Work certificate ( <i>Chainsaw, Forest Machinery &amp; Utility Arboriculture qualifications</i> )	Yes/No
Emergency First Aid ( <i>for all other qualifications</i> )	Yes/No

**I confirm that the following 2 assessments have been observed by the above applicant:**

	Date observed	Assessor name and number	Candidate name and number	Qualification
1.				
2.				

**(PLEASE NOTE: Observations must be in the applicants chosen technical area and it is preferred that one of the observations is with a Technical Verifier)**

**Declaration**

I confirm that the following Assessment Centre..... is willing to support the above applicant for a minimum of 12 months, subject to them successfully completing the assessor training.	
<b>Signature:</b>	<b>Date:</b>
Please return to <a href="mailto:QAsupport@cityandguilds.com">QAsupport@cityandguilds.com</a>	