



ASSESSORS
REPORT
SKILLS

Participant Name: _Student Smith
E-DofE ID No: _135486_____

This form can be printed, filled in and returned or completed on a computer and returned by email/image

Activity: Write what you're doing here eg: Reading

3 or 6 months: Write how long you did it for eg: 6

Date started: 12th September 2023

Date completed: 12th March 2024

Goals set by the participant: You write what you're hoping to achieve eg: To read books for pleasure and to improve my range of vocabulary.

How often did the participant take part? Three times a week.

How long in hours was each session 20 minutes.

Assessor's comments on what the young person was taught during their Skills section. In this section for the Skill, the assessor should write down what you were taught.

Assessors full name: Miss English Teacher

Assessors Signature (where possible): *Miss English Teacher*

Assessors Position/qualification: English teacher

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