INITIAL ASSESSMENT RESOURCING PROFILE

Candidate Name: ____________________________
Award to aim for: ____________________________

Occupational background/area of expertise:

Relevant qualifications held:

Tick (√) if yes

☐ Skill Scan completed

Particular assessment requirements identified
☐ Physical impairment
☐ Sensory impairment
☐ Learning difficulty
☐ Lacking confidence
☐ Language barrier

Requirements identified
☐ Physical aids
☐ Mechanical aids
☐ Technical aids
☐ Extra time for assessments
☐ Specially devised/adapted assessments
☐ Additional learning/training needs

Candidate Signature: ____________________________ Date: _________
Assessor Signature: ____________________________ Date: _________