

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

Other (specify, e.g. time available/shift work)

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 _____