

**OBSERVATION RECORD**

UNIT:.....

LEARNER NAME: .....

DATE OF OBSERVATION: .....

EVIDENCE INDEX NUMBER: .....

SKILLS/ACTIVITIES OBSERVED	AC'S COVERED

**KNOWLEDGE & UNDERSTANDING APPARENT FROM THIS OBSERVATION**

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**OTHER UNITS/ELEMENTS TO WHICH THIS EVIDENCE MAY CONTRIBUTE**

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**ASSESSOR COMMENTS & FEEDBACK TO LEARNERS**

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**I can confirm the learner's performance was satisfactory.**

**ASSESSOR'S SIGNATURE: ..... DATE: .....**

**LEARNER'S SIGNATURE: ..... DATE: .....**