



Application for the post of City & Guilds NPTC Certificate of Competence Assessor

(PLEASE COMPLETE IN BLOCK CAPITALS)

Applicants full name :			
Home address :			
Home telephone number :			
Mobile number :			
Fax number :			
Email address : This section <u>must</u> be completed			
	(Please write clearly)		
Please state which City & Gui	ilds qualification you wi	sh to be an Assessor for :	
Please state which City & Guilds qualification you wish to be an Assessor for: A potential Assessor must hold the relevant qualifications in which they want to assess and have the relevant industrial experience. We suggest that initially you opt for 1 qualification. Please note: Those wishing to become a Chainsaw Assessor must hold Chainsaw maintenance and cross cutting (formerly CS30) Felling and processing trees up to 380mm (formerly CS31) Felling and Processing trees over 380mm (formerly CS32)			
Please indicate below if you currently hold any of following First Aid certificates:			
I confirm that I currently hold a	a recognised	From:	
Emergency First Aid (for all other qualifications)		Expiry date :	
I confirm that I currently hold a	a Full First Aid at	From:	
Work certificate (Chainsaw, Forest Machinery & Utility Ar		Expiry date :	
NB. Please enclose a copy of your relevant certificate with your application			

Current employment address details :			
(if applicable)			
Work telephone number :			
Fax number :			
Please give brief job description			
Please provide details of any	relevant qualifications possessed with dates of attainment.		
NB. Please enclose copies of all relevant qualification documents with your application			
One of the requirements to become a City & Guilds NPTC Assessor is that you must have sufficient practical or teaching experience in the particular skill area for which you wish to be an assessor. Please state any other relevant Industrial/Professional experience that relates to this (Including approximate dates).			
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current/present employer or con	ddress of two referees one of whom must be your tract provider. (Unless this is a family member, then please eferee). One referee must be able to vouch for your		
competence and experience in the technical content of the qualification.			
Name :	The teerminean content of the qualification.		
Address:			
Contact Number :			
Name :			
Address:			
Contact Number :			
Are you an Assessor/Instructor f			
Organisation	Subject		
CITB			
ITSSAR			
LANTRA			
NPORS			
BST (BORDA Specialist Training)			
Other (Please state)			
., ,			
Do you assess or verify for any o	other Awarding Body'?		
If so please specify the awards and provide details:			
Do you currently hold any Assess	sear or Varifiar A or V units or TAAA units?		
Do you currently hold any Assessor or Verifier A or V units or TAQA units? If so please provide details:			
ii so picase provide details .			
Which counties would you be prepared to work in?			
Which counties would you be prepared to work in? Please write ALL if can travel throughout the UK			

When are you available to conduct Assessments?		
When are you available to conduct Assessments? e.g.:' Mondays only' or 'Available at short notice' etc.		
e.g wordays offiny of Available at SHOR Hotice etc.		
Γ=:		
Please identify those personal qualities which you possess that lead you to believe that you		
could function effectively in the position for which yo	ou have applied.	
Have you ever been convicted of a criminal offence	which is not yet 'spent' under the	
Rehabilitation of Offenders Act 1974 or have any pr		
If Yes please give details	occount portaining. 100 in 110 in	
a very give actual		
Declaration		
I wish to be considered for appointment to the above post and agree to comply with the		
appropriate qualification regulations.		
Signature :	Date :	
Signature :	Date :	

Please return the completed form to your local City and Guilds Assessment Centre

Assessment Centre: You do not need to send a copy of this to C&G but please keep on file for your QA audit

May 2015