

ASSESSOR EVALUATION FORM

DATE							
ASSESSOR'S NAME							
PURPOSE	PERIODIC EVALUATION <input type="checkbox"/> PRE-EMPLOYMENT EVALUATION <input type="checkbox"/> OTHER <input type="checkbox"/>						
UNIT ASSESSED							
ASSESSMENT TASK FORMAT	PRESENTATION <input type="checkbox"/> PROJECT <input type="checkbox"/> ROLE PLAY <input type="checkbox"/> REPORT <input type="checkbox"/> WRITTEN TEXT <input type="checkbox"/> ORAL TEST <input type="checkbox"/> OTHER: _____						
N/A = Not Applicable 1 = Unacceptable 2 = Needs Improvement 3 = Satisfactory 4 = Good / accomplishes tasks diligently and well 5 = Excellent / accomplishes all tasks at a high level							
Did the assessor:	N/A	1	2	3	4	5	COMMENTS
Remain as unobtrusive as possible when required to do so							
Explain the process to the candidate							
Use the specified criteria and evidence to judge competence							
Use only presented evidence to judge competence							
Make notes of their findings during the assessment process							
Develop feedback that is constructive and informative							
Complete the relevant assessor sections within the Assessment Checklist							

Use questions that were clear & did not lead the candidate							
Use justifiable questions							
Feedback informally (verbally) to the candidate after the assessment							
Discuss additional / supplementary evidence requirements (if applicable)							
Agree further actions (if applicable)							
Provide a deadline for providing formal feedback							
Show a good understanding of the criteria & evidence needed for the task being assessed							
Show effective interpersonal skills when interacting with the candidate							

ADDITIONAL/GENERAL COMMENTS:



Hallmark Institute
Suite 603, Level 6, 2 Meredith Street,
Bankstown NSW 2200
Tel: +61 2 9066 6903
CRICOS: TBA RTO ID: TBA
ABN: 53 661 584 541

STRENGTHS AND RECOMMENDATIONS:

EVALUATED BY: _____

SIGNATURE: _____ **DATE:** _____