



**ASSESSOR'S REPORT  
PHYSICAL**

Participant: \_\_\_\_\_

eDofE ID No.: \_\_\_\_\_

Level: **Silver**

Activity: \_\_\_\_\_

Date started: \_\_\_\_/\_\_\_\_/\_\_\_\_ Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Goals set by participant: \_\_\_\_\_

### **Assessor's comments:**

*Please write as much as possible talking about training teamwork (if applicable) and achievements.  
What you write will celebrate the achievement of the young person and will form part of their permanent record of their DofE programme.*

*I confirm that the above participant has attended during the above period and has averaged at least 1 hour per week over this period.*

Signature: \_\_\_\_\_

Assessor's first name: \_\_\_\_\_ Last name: \_\_\_\_\_

Assessor's position/qualification: \_\_\_\_\_

Assessor's phone number: \_\_\_\_\_

Assessor's email: \_\_\_\_\_



# ASSESSOR'S REPORT SKILLS

Participant: \_\_\_\_\_

eDofE ID No.: \_\_\_\_\_

Level: **Silver**

Activity: \_\_\_\_\_

Date started: \_\_\_\_/\_\_\_\_/\_\_\_\_ Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Goals set by participant: \_\_\_\_\_

## Assessor's comments:

*Please write as much as possible talking about training teamwork (if applicable) and achievements. What you write will celebrate the achievement of the young person and will form part of their permanent record of their DofE programme.*

*I confirm that the above participant has attended during the above period and has averaged at least 1 hour per week over this period.*

Signature: \_\_\_\_\_

Assessor's first name: \_\_\_\_\_ Last name: \_\_\_\_\_

Assessor's position/qualification: \_\_\_\_\_

Assessor's phone number: \_\_\_\_\_

Assessor's email: \_\_\_\_\_



**ASSESSOR'S REPORT  
VOLUNTEERING**

Participant: _____
eDofE ID No.: _____
Level: <b>Silver</b>

Activity: \_\_\_\_\_

Date started: \_\_\_\_/\_\_\_\_/\_\_\_\_ Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Goals set by participant: \_\_\_\_\_

**Assessor's comments:**

*Please write as much as possible talking about training teamwork (if applicable) and achievements.  
What you write will celebrate the achievement of the young person and will form part of their permanent record of their DofE programme.*

*I confirm that the above participant has attended during the above period and has averaged at least 1 hour per week over this period.*

Signature: \_\_\_\_\_

Assessor's first name: \_\_\_\_\_ Last name: \_\_\_\_\_

Assessor's position/qualification: \_\_\_\_\_

Assessor's phone number: \_\_\_\_\_

Assessor's email: \_\_\_\_\_