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|  | | | **Evidence Record Sheet**  OCR Level 4 Diploma in Career Information and Advice\*  OCR Level 6 Diploma in Career Guidance and Development\*  \*Delete as appropriate | | |
|  | | | | | |
| **Unit Title:** | **Assist clients to apply for learning, training or work** | | | | |
| **OCR unit number:** | **Unit 12** | | | | |
|  |  | | | | |
| **Learner Name:** |  | | | | |
| I confirm that the evidence provided is a result of my own work. | | | | | |
| **Signature of learner:** | |  | | **Date:** |  |

| **Learning Outcomes** | **Assessment Criteria** | **Evidence Reference** | **Assessment Method\*** |
| --- | --- | --- | --- |
| 1. Understand application processes and procedures for learning, training and work | 1.1 explain the range of application processes and procedures for learning, training or work  1.2 evaluate the nature and format of information required to make applications for learning, training or work |  |  |
| 2. Be able to assist clients making applications for learning, training or work | 2.1 provide advice to clients about the nature and format of application information required  2.2 provide assistance and advice to clients preparing for learning, training or work interviews |  |  |
| 3. Be able to evaluate with clients the outcomes of the application process for learning, training or work | 3.1 review with clients lessons learned from the application process for learning, training or work  3.2 discuss with clients how they will apply their knowledge and understanding of the application process in the future |  |  |
| **\*Assessment method key:** O = observation of learner, EP = examination of product; EWT = examination of witness testimony; ECH = examination of case history; EPS = examination of personal statement; EWA = examination of written answers to questions; QL = questioning of learner; QW = questioning of witness; PD = professional discussion | | | |

I confirm that the learner has demonstrated competence by satisfying all of the criteria for this unit and that I have authenticated the work.

Signature of assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name (in block capitals): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Countersignature of qualified assessor (if required) and date:

IV initials (if sampled) and date: Countersignature of qualified IV (if required) and date: