Record of Learner Observation

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| **Learner name:** |  |
| **Assessor name:** |  |
| **Qualification name and number:** |  |
| **Date and time of observation:** |  |

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| **Description of the learner’s activity.** **Please include:*** **the people present**
* **what was observed**
* **what the learner did.**
 | **Assessment objective (AO) met:** |
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| **Assessor signature:** |  | **Date:** |  |
| **Learner signature:** |  | **Date:** |  |