



WORKPLACE REPRESENTATIVE FORM

<p>All workplace representatives who verify student performance should complete the following form. The Assessor should provide this to the workplace representative where verification of student skills and knowledge are sought—provide to the student with the Student Self-Check Essential Knowledge and Skills to give to the workplace representative, or provide directly to the workplace if a Third Party Report is requested and negotiated. The form requires the workplace representative to verify they understand the process and that any verification and information they provide will be true and correct. The form is intended to reinforce the accountability and significance of workplace verifications.</p>						
<p>Purpose of this form: Swann College requires all workplace representatives who verify an RPL student skills and knowledge to complete this form. Such workplace representatives will typically be working with the student in a position of responsibility, perhaps their employer or supervisor, hold higher qualifications than the student, and have observed their workplace performance. To ensure all students gain recognition for skills and knowledge they genuinely hold, workplace representatives must carefully consider their verification of the student and provide accurate statements.</p>						
Students Name		Students Workplace				
Name of workplace representative completing this form			Workplace			
Is the workplace verification related to (tick response)			Student Self-Evaluation	<input type="checkbox"/> Yes	Third Party Report <input type="checkbox"/> Yes	
What is your working relationship with the Student? (e.g. Team leader, manager, employer, supervisor)						
Please list your qualifications and provide a summary of your experience:						
How long have you worked with the Student?						
Have you had an explanation, and do you understand what is required of you, in providing verification of the student's skills?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you understand your responsibilities in verifying a students' workplace skills and knowledge as accurately as possible?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you require more information about the requested workplace verification before completion?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you willing to be contacted if further verification of the students' skills and knowledge are required?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<p>Declaration: In signing this form you agree that you are appropriately qualified to verify the students' current workplace skills and knowledge, and you will provide the requested workplace verification, which is, accurate and correct.</p>						
Workplace representatives signature				Date		