**Practitioner Application for an Assessor**

This application form should be completed by applicants who are ready to start submitting their portfolio to be assessed by a UKPHR accredited assessor. Applicants need to be ready to begin uploading their commentary and evidence as soon as this form is submitted. Applicants will be assigned an assessor within 1 weeks of submitting this form.

*It is essential that you adhere to the dates of assessment and verification stated on this form as it enables the scheme to provide adequate resources to support your registration.*

The dates for Verification panels once booked, cannot be changed, so it is important that you plan your submission process accordingly.

Assessors for the scheme are senior members of the PH workforce and give their time voluntarily to the scheme in the interest of developing the PH workforce and contributing to their own CPD. Planning your submissions will help assessors to allocate their time for reviewing your work and ensure that work you submit can be assessed in a timely manner.

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| **Your Details** | | |
| Your name: |  | |
| Title (Dr, Mrs, Mr): |  | |
| Employing organisation: |  | |
| Job Title: |  | |
| Level of post (Public Health Skills and Knowledge Framework) |  | |
| Work address with postcode: |  | |
| Tel. No. | Work: | Mob: |
| Email address: |  | |

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| **Your Assessment Schedule** | |
| **Commentary 1 (C1) submission** | Date |
| TITLE Commentary 1 | |
| Clarifications required from assessor (within two weeks of above date) by: | Xx/xx/xxxx |
| Amendments to C1 (if any) to be returned to the assessor within 2 months by: | Xx/xx/xxxx |

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| **Commentary 2 (C2) submission** | Date |
| TITLE Commentary 3 | |
| Clarifications required from **assessor** (within two weeks of above date) by: | Xx/xx/xxxx |
| Amendments to C2 (if any) to be returned to the assessor within 2 months by: | Xx/xx/xxxx |

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| **Commentary 3 (C3) submission** | Date |
| TITLE Commentary 3 | |
| Clarifications required from **assessor** (within two weeks of above date) by: | Xx/xx/xxxx |
| Amendments to C3 (if any) to be returned to the assessor within 2 months by: | Xx/xx/xxxx |

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| **Verification** | |
| Preferred date of Verification Panel *(no longer than 12 months after submission of C1*) Please see panel dates below. | Xx/xx/xxxx |
| Please highlight any events/plans which may interrupt the assessment process including dates (for example holidays, sabbaticals, mat leave, change of job). Indicate the start and end date if known. | From: to:  Reason |

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| **Your Employer** | |
| Line Manager’s name: |  |
| Title (Dr, Mrs, Mr): |  |
| Job Title: |  |
| Work address with postcode: |  |
| Email address: |  |
| Employing organisation: |  |

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| **Applicant Declaration** |
| * I have read the UKPHR Framework and Guidance for Applicants, Assessors and Verifiers and fully understand the process of portfolio assessment and the requirements regarding transparency and audit * I have completed the e portfolio training and require a license to proceed after which I will be assigned an assessor * I understand that when I am assigned an assessor I will need to submit my commentary, evidence and JD/CV using the e portfolio system * I have completed all sections of this form * I understand the role of the assessor (ie: not a mentoring role) and I will communicate with the assessor through the e portfolio system appropriately * My line manger supports my application for assessment * I understand that non completion may lead to the scheme retrieving costs incurred |
| Applicants signature: |
| Date: |

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| Verification Panel Date | Portfolio to be complete by |
| Tuesday 31st January | Friday 30th December |
| Wednesday 29th March | Tuesday 28th February |
| Tuesday 23rd May | Friday 28th April |
| Friday 28th July | Friday 30th June |
| Thursday 28th September | Thursday 31st August |
| Wednesday 29th November | Friday 27th October |