



ASSESSOR'S REPORT
VOLUNTEERING

Participant: _____

eDofE ID No: _____

Level: **Silver**

Description of activity: _____

Date started: ___/___/___ Completed: ___/___/___ (___ months)

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 form part of their permanent record of their DofE programme. Please note: the information you have provided in this report will be scanned and stored by the DofE as part of its record of the participant's achievement. The DofE will not share your personal data with third parties.

What progress did they make towards their goals?

What did they achieve, what skills did they learn?

How frequently did they take part in this activity?

Any other comments?

Signature: _____ Date: ___/___/___ Assessor's

first name: _____ Last name: _____

Assessor's position/qualification: _____

Assessor's phone number: _____

Assessor's email: _____

Participants should scan or photograph this page and upload to eDofE as evidence.



ASSESSOR'S REPORT
PHYSICAL

Participant: _____

eDofE ID No: _____

Level: **Silver**

Description of activity: _____

Date started: ___/___/___ Completed: ___/___/___ (___ months)

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 form part of their permanent record of their DofE programme. Please note: the information you have provided in this report will be scanned and stored by the DofE as part of its record of the participant's achievement. The DofE will not share your personal data with third parties.

What progress did they make towards their goals?

What did they achieve, what skills did they learn?

How frequently did they take part in this activity?

Any other comments?

Signature: _____ Date: ___/___/___ Assessor's

first name: _____ Last name: _____

Assessor's position/qualification: _____

Assessor's phone number: _____

Assessor's email: _____

Participants should scan or photograph this page and upload to eDofE as evidence.



ASSESSOR'S REPORT
SKILLS

Participant: _____

eDofE ID No: _____

Level: **Silver**

Description of activity: _____

Date started: ___/___/___ Completed: ___/___/___ (___ months)

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 form part of their permanent record of their DofE programme. Please note: the information you have provided in this report will be scanned and stored by the DofE as part of its record of the participant's achievement. The DofE will not share your personal data with third parties.

What progress did they make towards their goals?

What did they achieve, what skills did they learn?

How frequently did they take part in this activity?

Any other comments?

Signature: _____ Date: ___/___/___ Assessor's

first name: _____ Last name: _____

Assessor's position/qualification: _____

Assessor's phone number: _____

Assessor's email: _____

Participants should scan or photograph this page and upload to eDofE as evidence.