

DANCING ACHIEVEMENT AWARD ASSESSORS' REPORT FORM

Name of Branch/Centre:					
Date of Assessment:					
Level(s) assessed:		• • • • • • • • • • • • • • • • • • • •			
Assessor 1:					
Assessor 2:					
Please note that only one Report Form is In the unlikely event of disagreement beta	•				
Did the assessment run smoothly?	Yes	No		(Please insert 'X')	
If NOT, please identify any problem	s below:				
Assessor 1			Date		••••••
Assessor 2	•••••	••••••	Date		••••••