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| --- | --- |
| Candidate name: | Complete or partial? |
| Candidate start date: | Candidate end date: |
| Have adaptations been used? | |
| Does this candidate meet the minimum requirements? | |
| Qualification title: | |

**Please list the units included in the submission:**

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| **Summary of attainment:**  Complete (C)  Partial (P)  Not Complete (NC) | **Units:** | **Comments:** | **File page ref.** |
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| **Assessor Declaration of partially completed qualification** *(a breakdown of the partially completed units with details of additional supporting evidence to substantiate the claim that this learner would have completed the qualification). Please note this section must be sufficiently detailed to ensure that the EQA agrees to award this learner.* |

**Assessor Declaration*:*** *I confirm that the details above are correct and that the evidence presented is the candidate’s own work:*

**Candidate Declaration:** *“I confirm that the evidence in this portfolio is all my own work.”*

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| Candidate signature: | Date: |
| Assessor signature: | Date: |
| Checked by internal moderator (signature): | Date: |