

Assignment Assessment Form

iUBT323 – Monitor and maintain spa area

Instructions:

- Assessors must use this form to evaluate Learners’ submitted evidence, which may be a combination of some or all of the types listed below. Please indicate with a ✓ which source of information was submitted and accepted, and indicate with an × evidence submitted but not accepted
- Learners may re-submit evidence for further evaluation at any stage of their course in order to achieve success
- When all evidence has been submitted and accepted Assessors must place a ✓ in the Assignment Completed box. This indicates a pass mark
- The form must be placed with the project evidence for ITEC external verification purposes

	Written Word	Chart	Diagram	Graph	Other Pictorial Presentation	Date Accepted
Steam						
Sauna						
Hydrotherapy						
Showers						
Relaxation rooms(s)						
Assignment Completed					Pass	

Learner name: _____

Learner signature: _____ **Date:** _____

Lecturer/Assessor name: _____

Lecturer/Assessor signature: _____ **Date:** _____

Internal Quality Assurer name: _____

Internal Quality Assurer signature: _____ **Date:** _____

External Quality Assurer or Examiner name: _____

External Quality Assurer or Examiner signature: _____ **Date:** _____

(if sampled)

Document History

Version	Issue Date	Changes	Role
v1	27/09/2019	First published	Qualifications and Regulation Co-ordinator