

Instructors' Practical Assessment Record Sheet Intermediate Licence

Date of Course Commencement <input style="width:90%;" type="text"/>	Date Completed <input style="width:90%;" type="text"/>
Instructor name (please print) <input style="width:90%;" type="text"/>	Registration No. <input style="width:90%;" type="text"/>
Course Venue <input style="width:95%;" type="text"/>	

Details of Assistant Instructors in connection with the Training Course

Name <input style="width:90%;" type="text"/>	Callsign <input style="width:90%;" type="text"/>	Registration No. <input style="width:90%;" type="text"/>
Name <input style="width:90%;" type="text"/>	Callsign <input style="width:90%;" type="text"/>	Registration No. <input style="width:90%;" type="text"/>

Date of Intermediate Examination <input style="width:90%;" type="text"/>	RSGB Examination Centre ID <input style="width:90%;" type="text"/>
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Candidates Registered for Assessments

	Candidate Name	DOB	Intermediate Practical Assessments										
			(Tick items completed)										
			10d.1	10d.2	10d.3	10d.4	10d.5	10d.6	10d.7	10d.8	10e.1	10f.1	
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													

Notes

I confirm that the details given above are correct

Registered Assessor Signature <input style="width:95%;" type="text"/>	Date <input style="width:90%;" type="text"/>
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