## Candidate Record of Evidence from Workplace (CREW)

CREW No

(To be completed by the candidate)

Candidate's name					Name of site or place of work
Year (circle)	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	
Date	From		Т	ō	

Attach a photograph or sketch of the work undertaken during this period.	Give a brief description of the work you carried out during this period.
	Make a list of the skills, techniques and knowledge that you experienced during this period.
	Candidate's signature Supervisor's signature

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The candidate and the lecturer/assessor should discuss the evidence before completing this review

	Action Plan
Make a list of the aspects of the work undertaken during this period that you are confident with.	Agreed actions to be taken to improve the aspects of this work which need development.
Make a list of the aspects of the work undertaken during this period that you feel you are less confident with or need more experience.	Candidate's signature   Lecturer/Assessor's signature   Internal Verifier's signature   External Verifier's signature