

### Template for Workplace Representative Form

All workplace representatives who verify candidate performance should complete the following form. The assessor should provide it to the workplace representative when verification of candidate skills and knowledge is sought—perhaps by giving it to the candidate with the *Candidate Self-evaluation Tools* so they can in turn give it to the workplace representative, or by giving it directly to the workplace if a *Third Party Report* is requested and negotiated.

The form requires the workplace representative to verify that they understand the process and that any verification and information they provide will be, to the best of their ability, true and correct. The form is intended to reinforce the accountability and significance of workplace verifications.

Delete this page before using.

**Note:** This template is from the *RPL Assessment Toolkit for CHC30113 Certificate III in Early Childhood Education and Care **Forms and Templates***. See the **Assessor Guide** of that suite of resources for further information on its application.

## Confidential Workplace Representative Form: CHC30113 Certificate III in Early Childhood Education and Care

**Purpose of this form:** The Registered Training Organisation (RTO) in which the candidate below is enrolled, requires all workplace representatives who verify an RPL candidate's skills and knowledge to complete this form. Such workplace representatives will typically be working with the candidate in a position of responsibility, perhaps their employer or supervisor, hold higher qualifications than the candidate, and have observed their workplace performance. To ensure all candidates gain recognition for skills and knowledge they genuinely hold, workplace representatives must carefully consider their verification of the candidate and provide accurate statements.

<b>Candidate's name</b>		<b>Candidate's workplace</b>	
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<b>Name of workplace representative completing this form</b>		<b>Workplace</b>		
Is the workplace verification related to <i>(tick response)</i> :	<i>Candidate Self-evaluation?</i>	<input type="checkbox"/> Yes	<i>Third Party Report?</i>	<input type="checkbox"/> Yes
What is your working relationship to the candidate? <i>(e.g. team leader, manager, employer, supervisor)</i>				
Please list your qualifications and give a summary of your experience in Children's Services				
How long have you worked with the RPL candidate? <i>(Please provide date range if possible.)</i>				
Have you had an explanation, and do you understand what is required of you, in providing verification of the candidate's skills?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you understand your responsibilities in verifying a candidate's workplace skills and knowledge as accurately as possible?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Would you like to be provided with more information about the requested workplace verification before you complete it?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you willing to be contacted if further verification of the candidate's skills and knowledge is required?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>Declaration:</b> In signing this form you agree that you are appropriately qualified to verify the candidate's current Children's Services-related workplace skills and knowledge, and that if you provide the requested workplace verification, it will be, to the best of your knowledge, accurate and correct.				
<b>Workplace representative's signature</b>		<b>Date</b>		