Essential Skills Wales

Essential Application of Number Skills (EAoNS) Level 3 Controlled Task

Assessment Record

Raising Fitness Levels							
Version 2.3 Sample (Set A)							
Candidate name:							
Candidate number:							
Date registered for EAoNS	S:						
Unique Learner Number (ULN) (if applicable):						
Centre name <i>or</i> number:							
Supervisor name:							
Assessor Declaration I confirm that the controlle conducted under the spec	on started and ended must be record d task is entirely the work of the cand ified conditions and completed within	didate named above. It was					
working time requirements The candidate has met / h	as not met* the standards required fo	or the controlled task.					
Assessor name:	Assessor signature:	Date:					
Internal Quality Assurer I confirm that the required	Declaration (if sampled) standards have been met / have not	been met*.					
IQA name:	IQA signature:	Date:					

*Please delete as appropriate

WJEC

C



Assessment Record

Row	Max. mark	Assessor			Assessor comments	IQA	EQA
					* At least 1 mark from row A required to pass	(if sampled)	
		N3.1	N3.2	N3.3			
Α	2						
В	2						
		Part 2					
С	1						
D	2						
E	2						
F	3						
G	1						
			Part 3				
Н	1						
J	2						
K	3						
L	2						
М	1						
		Part 4					
N	1						
Р	2						
Q	1						
R	2						
S	2						
Т	1						
U	2						
	Totals	/9	/13	/11			
Pass	mark	6	9	8			
Pass (√/x)							

Overall pass (✓/x)
Pass mark achieved for each component, with at least 1 mark from row A