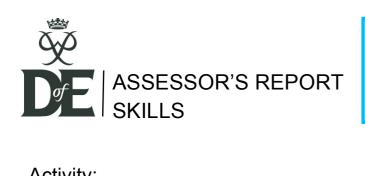


Participant:	
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ease write as much as possible talking about training teamwork (if applicable) and achievements. hat you write will celebrate the achievement of the young person and will form part of their permanent cord of their DofE programme.
confirm that the above participant has attended during the above period and has averaged at least 1 hour or week over this period.
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ssessor's position/qualification:
ssessor's phone number:

Assessor's email:



Participant:	
eDofE ID No.:	
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Activity:
Date started:/ Completed:/
Goals set by participant:
Assessor's comments:
Please write as much as possible talking about training teamwork (if applicable) and achievements. What you write will celebrate the achievement of the young person and will form part of their permanent record of their DofE programme.
I confirm that the above participant has attended during the above period and has averaged at least 1 hour per week over this period.
Signature:
Assessor's first name: Last name:
Assessor's position/qualification:
Assessor's phone number:

Assessor's email:



Participant:
eDofE ID No.:
Level: Bronze

Activity:
Date started:/ Completed:/
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Assessor's email: