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| Assessment Outcomes Sheet | | | | | | | | | | | | | | | | | | | | |
| **Client Name**: | | |  | | | | | | | | | **Legend** | **Delivery Code:**  **01** – Classsroom  **02** - Correspondence  **03** – Workplace  **04** – Online  **05** – Assessment Only | | | **Assessment Code (AC):**  **S** – Satisfactory  **NYS** – Not Yet Satisfactory  **RPL** – Recognition Prior Learning  **RCC** – Recognition of Current Competency  **CT** – Credit Transfer | | | | |
| **Qualification / Accredited Course** : | | |  | | | | | | | | |
| **Qualification / Course Packaging Rules** | | | Total units/ Modules required =  ( xxx = Core (C); and xxx = Elective ) | | | | | | | | |
| **Outcome Details** | | | | | | | | | | | | | | | | | | | | |
| **No.** | **Unit / Module**  **Code** | | | **Delivery Code** | **Core /Elective**  **(C/E)** | **Assessment Record :** | | | | | | | | | **Training Journal** | | | | **Final Result** | |
| **Attempt 1** | | | **Attempt 2** | | | **Attempt 3** | | |
| **AC** | **Date** | | **AC** | | **Date** | **AC** | | **Date** | **AC** | | | **Date** | **AC** | **Date** |
| **1** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| **2** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| **3** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
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| **9** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| **10** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| **11** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| **12** |  | | |  |  |  |  | |  | |  |  | |  |  | | |  |  |  |
| \*\* If there is insufficient room to record all Units/Modules; please use a second form. | | | | | | | | | | | | | | | | | | | | |
| **Completion Confirmation** | | | | | | | | | | | | | | | | | | | | |
| All Units / Modules have been successfully completed for this qualification / Course. Client is entitled to receive qualification. | | | | | | | | | | | | | | | | | | | | |
| **Admin Name**: | |  | | | | | | **Signature:** | |  | | | | | | | **Date:** | | / / | |