



**Moderation Evidence Sheet**

**Evidence Sheet**

Name of person submitting assessment evidence:

Name of Registered Training Organisation: Perth Boat School

Meeting Date:

Qualified Assessors Names & RTO Name (Team)

Assessment Context	Metro	<input type="checkbox"/>	Regional	<input type="checkbox"/>
Assessment:	On-the-Job	<input type="checkbox"/>	Off-the-job	<input type="checkbox"/>

Assessment Plan for unit / units (National Code)

Assessment Tools

Student Work



Moderation Evidence Sheet

**Moderation Result**

Plan Moderated Yes  No

Comments  
\_\_\_\_\_

Tools Moderated Yes  No

Comments  
\_\_\_\_\_

Student samples Validated Yes  No

Comments  
\_\_\_\_\_

ACTIONS	BY WHOM	BY WHEN

Another meeting required: \_\_\_\_\_

Date: \_\_\_\_\_

Moderation Team sign off:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_