

Witness statement Form

Guidance note:

Please complete one witness statement per part e.g. Unit 1 Part A

In general witness statements should not cover missing evidence for a whole part unless special approval has been sought in advance

Witness statements must be true and factual records of conversations or observations of the young persons, knowledge and skills as it relates to the award requirements.

Centre Name:		Centre Number:	
Young person name:			
Adviser name:			
Witness name: (if not the adviser)			
Witness role/job title:			
Award level:		Award Part: (including Unit of applicable)	

Please confirm why a witness statement is being provided in addition to or in lieu of evidence developed by and with the young person:

Please provide a full description of the activity, including how it was carried out, where it took place, and any other relevant details. Simply stating that the activity occurred is not sufficient. Please also explain how the activity meets the specific evidence requirements and assessment criteria covered by the witness statement.

Witness signature:

Date:

Adviser signature:

Date: