

## Maldives National Skills Development Authority

AR-2018v4 ANNEX 6

## **Assessor Registration Form**

Person	nal Deta	ils								
Name:										
Gender	:									
Nationa	ality:									
NID										
Present Address:										
Ticsciii	Auurcss	•	Atoll:		Isla	and:				
Permanent Address:		ess.		•		<u> </u>				
		CBB.	Atoll:		Island:					
Phone:										
E-mail:	;									
Educa	tional (	Qualific	ation							
Qualification			Level		Year	Institution		Country		
Emplo	oyment l	Details								
Position Held				Employer				From To		
Field o	of Assess	sment (	TVET Auth	ority Qua	lifica	ation to be a	assessed)			
Level		Name o	of Qualificati	ion						
Assessor Training Program										
Have you(assessor) undergone the Assessor Training Program?										
	Yes		No							

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## FOR OFFICIAL USE

## Checklist

Checklist									
#	Items to C	heck						Check by TVETA	
1	Completed Assessor Registration Form								
2	Curriculum Vitae of the Assessor								
3	National ID Card Copy of the Assessor								
4	Academic Certificates & Employment Reference Letter(s) of the Assessor								
DEC	ISION								
Asses	sor Registere	ed	REGISTERED	NOT REGISTERED					
Authorized By:									
Signature			Date:	/20					
Assessor Information uploaded to the Database			UPDATED	ZD CD					
Staff that entered the Data into Database (Name & Designation)									
Signature						Date &Time			