Assessor Registration Form

Part 1: Personal Details:

Name:	Gender:	CID No:
Current Address *(Name of Institute/Organization and location)*		
Designation:	Email:	Contact no:

Part 2: Assessor Registration Criteria:

Note: In-order for Assessor to be registered, all columns must be ticked accepted.

Criteria	Official Use
1. Assessor Training Certificate*:(issued by ACD as competent assessor)* ***(Please enclose the Assessor Training Certificate)***	Accepted ☐ Not accepted ☐
2. Academic/Technical/Professional background: *(at least 1 level higher)* ***(Please enclose academic/professional certificate)***	Accepted ☐ Not accepted ☐
3. Relevant work experience: (minimum 5 years) ***(please mention organization and number of years)*** 1. 2. 3	Accepted ☐ Not accepted ☐
4. Present job responsibility: (relevant to occupation) ***(briefly describe your main job responsibility)*** 1. 2. 3. 4.	Accepted ☐ Not accepted ☐
Documents verified by:_____ Date _____	

Part 3: Assessor Registration Endorsement:

Registration:	Registration Number (If accepted):	Endorsed by:
Accepted ☐ NOT Accepted ☐	_____	Director, DOS _____ Date:

Important: *Documents to be enclosed along with the Form: Passport size photograph, Assessor training certificate and other academic/technical certificates.*