This is not necessary for paperwork deferrals or first aid – just comment on the attendance sheet.

Feel free to expand any text boxes with more detail.

It will be shared with the candidate on their written request.

Please email a copy to me: info@countrysideleaderaward.org

## Report for Re-Assessor

|  |  |
| --- | --- |
| Candidate Name |  |
| CLA number or Date of Birth |  |
| Assessment Date |  |
| Reason for Deferral, with Examples |
| Reassessment Required |
| Other Comments |
| Date of report |  |
| Assessor name |  |