



# Domestic Electrician Experienced Worker Assessment: Candidate Background

If you feel the Domestic Electrician Experienced Worker Assessment (DE EWA) is the right route for you, once you have completed your Skills Scan self assessment, please complete the form below. You will need to send this, and a copy of your Skills Scan, to your chosen training provider. A follow-up discussion will be arranged to review and verify the information you supply in order to agree the level of support you'll need to complete the EWA and the price.

## CANDIDATE DETAILS

Candidate Name:

Contact Number:

Email:

## EMPLOYER DETAILS

Employer Name:

Address:

Postcode:

Employer Contact Name:

Contact Number:

Email:

## WORK HISTORY AND PRIOR EXPERIENCE

**Outline of current job role and work related courses or qualifications** (e.g. safety, abrasive wheels, first aid, PASMA, related technical certificates etc.):

## WORK HISTORY AND PRIOR EXPERIENCE - *continued*

**Comment on your proficiency and experience in the following types of work - giving examples:** (you may provide supporting or additional material if you need to expand on this section):

- Existing dwellings: full/part rewires
- Existing dwellings: new circuits
- New domestic installations
- Removing and replacing floorboards / floor coverings
- Working with different types of building fabric
- Dealing with potentially hazardous materials (lead cable, asbestos, fibreglass insulation, low pressure mercury vapour tubes, waste management)
- Making good on décor / building fabric after work
- Routing and installing cables and positioning equipment in accordance with Building Regulations / Standards
- Dealing with customers (e.g. occupied dwellings) and customer service / interpersonal skills

**WORK HISTORY DETAILS:** brief description of projects you were involved in with approximate start and finish dates (relevant to the assessment criteria):

Employer:  Role:

Contact Tel:  Contact Email:

Company member of a CPS? *If so which:*

Project/Job location:  Start/Finish Dates:

**Details:**

Employer:  Role:

Contact Tel:  Contact Email:

Company member of a CPS? *If so which:*

Project/Job location:  Start/Finish Dates:

**Details:**

Employer:  Role:

Contact Tel:  Contact Email:

Company member of a CPS? *If so which:*

Project/Job location:  Start/Finish Dates:

**Details:**

### ADDITIONAL CANDIDATE COMMENTS

Please note any additional comments related to your application:

### EMPLOYER SUPPORTIVE COMMENTS (optional)

Opportunity for employer to comment on candidate's strengths and abilities:

### FOR TRAINING PROVIDER USE \*(delete as required)

Does the candidate hold relevant L2 qualifications that have been verified? Yes:  No:

Does the candidate hold relevant L3 qualifications that have been verified? Yes:  No:

A technical discussion has been carried out and has been Recorded/Documented\* for EQA purposes? Yes:  No:

### DECLARATION OF SUITABILITY FOR DOMESTIC ELECTRICIAN EXPERIENCED WORKER ASSESSMENT

The following should be completed by the candidate and training provider following a review of the candidate's knowledge and experience, and retained by the training provider:

**Learner Declaration:** I declare the information within this form and my Skills Scan to be a true representation of my understanding and experience:

Name:  Signature:  Date:

**Assessor Declaration:** I confirm I have authenticated the applicant's knowledge and experience and it meets DE EWA registration requirements:

Signature:  Name:

Organisation:  Date: