



**Kimbolton  
School**

Participant's name:
eDofE ID number:

**DofE Gold Award, Assessors Report**

**Activity Category:** .....

**Activity:** .....

**Date Started:**..... **Date Completed:**.....

**Assessor's comments:** .....

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In addition to the report, the assessor is also confirming that the participant has met the requirements of the DofE Residential section in terms of: timescale, course content/activity/delivery, group size, accommodation, daytime/evening programme, prior knowledge of other attendees /staff, prior briefing/information before departure and that the course is not a DofE practice/assessed expedition.

Requirements: <http://www.dofe.info/en/content/cms/doing-your-dofe/activities-sections/residential/residential-require/>

**Assessors Signature:**..... **Date:**.....

**Assessors Name (print):**.....

**Assessors Position / Qualification:**.....

**Assessors phone number or email:**.....