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| **COURSE MARKING SHEET**  **PRACTICAL CASE STUDIES** | |
| Use this document alongside the assessment workbook / portfolio to determine if the learner has covered all the required learning outcomes to the required standard. This is a knowledge only course. | |
| Candidate name | CIBTAC/SDTC Registration Number |
| Date of Case Study marking | Pass date |

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| **Course Assessment requirements for practical case study assessment** | |
| Sufficient client numbers & treatments |  |
| Consultation and consent documentation |  |
| Treatment plan |  |
| Treatment descriptions, client responses & individual treatment evaluations |  |
| Photographic or video evidence |  |
| Evaluations for each case study client |  |
| Reflective evaluation of your own performance |  |
| Presentation and organisation |  |

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| Assessor Comments | Well done (insert learner name). You have now completed the case study assessment requirements for the …… Unit .  **Assessor comments**  **Your Case Study**  Your work is reflective of hard work and effort clearly demonstrating excellent commitment and dedication to your learning and the course itself. |
| Assessor name | Assessor Signature |