

# Duke of Edinburgh Adventurous Journey Assessor Competency Form

I, \_\_\_\_\_ am suitably qualified/sufficiently experienced to be an assessor for the tramp to \_\_\_\_\_ departing on \_\_\_\_\_

Please detail qualifications/experience \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have read the Assessor Guidelines document and the Assessor Checklist document and understand the requirements of all aspects of this tramp meet the Award level being undertaken by the participants.  
I understand that I am fully responsible for developing and implementing the safety guidelines for this journey, and for ensuring adherence to all elements of best practice during all parts of the activity.

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_

Next of Kin

Name \_\_\_\_\_ Phones \_\_\_\_\_  
Address \_\_\_\_\_