

TOWARDS INDEPENDENCE

Animal Care with Horse Riding & Stable Management

Evidence Record Sheet

This form is optional. It can be used to support the information in your candidate's portfolio, to provide additional, more detailed information on how each activity or project was accomplished.

Name of candidate:

Module: Towards Independence (Animal Care with Horse Riding and Stable Management)

Section completed (please circle as appropriate):

A B C D E F G H I J K L M N O

Evidence:

For example: A photograph or written statement to explain how the activity was achieved

Level of support given for this section: Please tick one overall level of support



NH - No Help



PH - Physical Help



SH - Spoken / Signed Help



SE - Sensory Experience



GH - Gestural Help



ER - Experience Recorded

Verified by:

Date:

Signature:

Page: