



CACDP is committed to promoting communication between deaf and hearing people. We will do this by offering high quality nationally recognised assessments and awards in sign language and other forms of communication, and registration systems for Language Service Professionals.

LEVEL 3 BSL/ISL MODERATORS

**Salary for 2008 – £78 for desktop moderation at home
£206 for a moderation visit to a centre**

The primary role is to moderate Level 3 BSL video-recorded assessments including documentation and writing reports within a timescale.

The persons appointed should have the following skills and knowledge:

Essential

- Level 4 NVQ in BSL/ISL.
- A1 or V2 Assessor Awards, including D32/33/34 awards.
- Objectivity, fairness and honesty.
- Organisational, communication and presentation skills.
- Ability to read and understand written English used in the Level 3 BSL/ISL Qualification Specification.

Desirable

- Knowledge of Level 3 British/Irish Sign Language, either in teaching or assessing.
- A teaching qualification.
- Teaching experience.
- Skills/qualification in assessments.
- Knowledge of Word documents and an email address.

We will advise you after the closing date if your application has been successful. If you are selected for training as a Moderator for Level 3 BSL/ISL, you will need to attend the following training day:

21 October 2008 - Durham

Closing date: Tuesday 23 September 2008 at 10am

Application forms and further details are available from Joanne Wears, CACDP, Durham University Science Park, Block 4, Stockton Road, Durham, DH1 3UZ.

Tel: 0191 383 1155 – Textphone: 0191 383 7915 – joanne@cacdp.org.uk

Alternatively, you can download the application form and details from www.cacdp.org.uk.



ASSESSOR/MODERATOR TRAINING APPLICATION FORM

Which Assessor/Moderator training event are you applying for?	Event date:
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PERSONAL DETAILS

Title:	First Name:	Last Name:
Address:		Telephone/Textphone No:
Postcode:		Fax No:
Email:		SMS:

CACDP QUALIFICATIONS

Please list your CACDP qualifications.	When?

ASSESSOR EXPERIENCE/QUALIFICATIONS

Please list any assessor experience and/or qualifications.	When?

LINGUISTICS COURSES

Please list any Linguistics courses you have done or are doing.

When?

Please list any Linguistics courses you have done or are doing.	When?

TEACHING QUALIFICATIONS

Please list any Teaching qualifications you have done or are doing.

When?

Please list any Teaching qualifications you have done or are doing.	When?

TEACHING EXPERIENCE

Please explain what teaching experiences you have.

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PERSONAL STATEMENT

Please give your reasons for applying on the training course. Outline the skills and experience that, in your view, make you a suitable applicant.

Please use a continuation sheet if necessary.

LANGUAGE SERVICE PROFESSIONAL (if applicable)

Please note that at BSL Assessor/Moderator Training events, we do not provide communication support as these courses are delivered in BSL.

Speech to Text Reporter

Notetaker

BSL/English Interpreter

Lipspeaker

Deafblind Manual LSP

Other (please give details below)

I will be bring my own Language Service Professional

(please provide name and contact details of LSP below)

MATERIAL FORMAT (if applicable)

Large Print

Braille

DIETARY OR ANY OTHER SPECIAL REQUIREMENTS (if applicable)

Please explain clearly any requirements you have:

DATA PROTECTION ACT 1998

CACDP Charity No: 1071662

The information you provide may be used in connection with CACDP's assessments, awarding and registration processes, charitable activities, products, services and events.

We will not disclose this information to any other person or organisation, except in connection with the above purposes. CACDP's Data Protection Statement is available from the CACDP website (www.cacdp.org.uk) or by contacting CACDP's Head Office.

Your full name:

OTHER INFORMATION

Are you:

Deaf BSL user

Deaf English User

Hard of Hearing

Hearing

Deafblind

Other

REFERENCES

Please give the names and addresses of two references who can provide comments on your work performance. If you are unable to provide employment referees you should provide academic or personal referees, clearly stating your relationship to the referee.

Name:	
Referee's Job Title:	
Company Name:	
Address:	Telephone/Textphone No:
	Fax No:
Postcode:	Relationship, if any:
Email:	

Name:	
Referee's Job Title:	
Company Name:	
Address:	Telephone/Textphone No:
	Fax No:
Postcode:	Relationship, if any:
Email:	

DECLARATION

I certify that the information I have given in this application is true and correct to the best of my knowledge. I have completed all relevant sections of this application form and have requested references to support my application.

Signature:	Date:
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