

European Chemist Registration Board

NATIONAL ASSESSMENT PANEL REPORT



Form to be completed by the national assessment panel (English only)



National Society

Assessment panel members:

Applicant's name: _____

	check <input checked="" type="checkbox"/>	
	yes	no
A Academic qualifications The candidate's academic qualifications have been verified	<input type="checkbox"/>	<input type="checkbox"/>
B Professional experience The candidate meets the ECRB guidelines on professional experience	<input type="checkbox"/>	<input type="checkbox"/>
C Reports from Referees A report by the referees is attached	<input type="checkbox"/>	<input type="checkbox"/>
D Recommendations The Assessment Panel recommends that the applicant be registered as a „European Chemist“	<input type="checkbox"/>	<input type="checkbox"/>
E Additional Comments	<input type="checkbox"/>	<input type="checkbox"/>

Providing the application is filled in other language than English, this Panel guarantees that all the ECRB requirements are met.

Date

Chairman's signature: _____

Official stamp/seal (if applicable)

LS

(Please attach this form to the applicant's form)

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