



EMPLOYER RECOMMENDATION SHEET

THIS EMPLOYER RECOMMENDATION SHEET MUST BE COMPLETED AND RETURNED BY ____ 00 MONTH YEAR _____, (WHICH WILL BE 26 DAYS FROM THE DATE THAT VETASSESS SENDS THE VALIDATOR'S RECOMMENDATION TO THE EMPLOYER).

NOTE: VETASSESS WILL SEND AN EMAIL TO EMPLOYERS TO ADVISE WHEN THE VALIDATOR RECOMMENDATION HAS BEEN SENT.

Applicant File No:		Date: ____ / ____ / ____ Date Month Year
Employer Name:		
Classification for which the teacher is seeking validation		

EMPLOYER RECOMMENDATION (TICK ONE)

Standard	Standard No.	Validator recommendation (indicate yes/no)	Employer endorsement of validator recommendation	Employer non-endorsement of validator recommendation	Reason for non-endorsement of validator's recommendation

Validator Recommendation	Tick One: <input type="checkbox"/> <i>I recommend that the applicant has met the requirements for reclassification</i> <input type="checkbox"/> <i>I recommend that the applicant has not met the requirements for reclassification</i>
	Validator Signature: Date: ____ / ____ / ____ Date Month Year

Employer Recommendation	Tick One: <input type="checkbox"/> <i>We endorse the validator's recommendation</i> <input type="checkbox"/> <i>We do not endorse the validator's recommendation</i>
Employer Signature:	Date: ____ / ____ / ____ Date Month Year



Quality
Endorsed
Company
QEC23802