**This form must be completed by each panel member and returned to your Recruitment representative.**

SCORING:

The scoring should be based on the answers to each question:

|  |  |
| --- | --- |
| 0 | Failed to answer |
| 1 | Answered partially |
| 2 | Answered fully |
| 3 | Exceptional |

|  |  |  |  |
| --- | --- | --- | --- |
| **Job Reference Number:** |  | **Job Title:** |  |
| **Panel Members:** |  | | |
| **Interview Date:** |  | **Venue:** |  |

|  |  |
| --- | --- |
| **QUESTIONS** | |
| **1** |  |
| **2** |  |
| **3** |  |
| **4** |  |
| **5** |  |
| **6** |  |