Interview Assessment Control Form

NLA Reference Number:	
Post Title:	
Date:	
Interview Location:	
Interview Panel Members:	

Name of Applicant	Score Chair	Score Panel 2	Score Panel 3	Total	Outcome
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select
					Please Select

Interview Scores: 4 = Exceptional, 3 = Above Average, 2 = Average, 1 = Below Average, 0 = Unacceptable