**Cover Sheet for Submission of Formative/Summative Practice Competency Tape**

**Tape A B C (delete as appropriate)**

Name:

Date:

Session number:

*“I certify that I have conducted this clinical work in line with appropriate professional practice guidelines, Codes of Ethics [e.g. BABCP Standards of Conduct, Performance and Ethics] and/or workplace Policies, which have been strictly adhered to in terms of making the recording and seeking permission for use. A signed consent form is attached to demonstrate that the client has understood the reasons for and manner of this recording.”*

*Signed: …………………………………………. Trainee Name:*

**Please attach** **IY Self Evaluation Form and Group Leader Checklist, Reflective Log**, **signed consent form(s) and your video/CD.**