**Applicant Sign-off Mentor (SOM) Reference form**

 STRICTLY CONFIDENTIAL

|  |  |
| --- | --- |
| **Name of applicant** |  |
| **Name of SOM** |  |
| **Job title** |  |
| **AHCS/HCPC registration number** |  |
| **Contact number** |  |
| **Work address** |  |
| **Professional relationship to applicant** |  |
| **Length of time applicant known** |  |

# Please tick one of the boxes below:

I support the submission 

I have reservations about the submission 

|  |
| --- |
| **SOM COMMENT: From the evidence seen in the portfolio, please comment on** |
| * Adequacy and currency of the applicant’s genetic knowledge base and expertise overall
* Applicant’s self-awareness, recognition of boundaries and ability to liaise appropriately with colleagues
* Applicant’s professional/academic activities
* Applicant’s use of counselling supervision (as defined by the AGNC Supervision Working Group Report on Supervision) and practice within the AGNC Code of Ethics and the GCRAB Code of Conduct (005\_POL). Association of Genetic Nurses and Counsellors Supervision report (2022) and AGNC Code of Ethics (2021) are both available at: <https://www.agnc.org.uk/info-education/documents-websites/>
 |
| [*please insert your comments here*] |

# Assessment of five observed consultations with case log numbers

|  |  |  |
| --- | --- | --- |
| **Case** | **Case Log Number** | **Observations** |
| **1** |  |  |
|  **2** |   |  |
|  **3** |  |  |
|  **4** |  |  |
|  **5** |  |  |

|  |  |  |
| --- | --- | --- |
| **Case Study Title** | **eSignature of SOM** | **Date** |
| **1 - Counselling case study**  |  |  |
| **2 - Ethical case study** (Not required for Set C or Set A reduced portfolio requirements) |   |  |
| **3 - Scientific case study** (Not required for Set C or Set A reduced portfolio requirements) |  |  |
| **Essay**  |  |  |

Please refer to Applicant Guidelines (027\_DOC) for portfolio requirements (Set A/B/C).

**I confirm that I have discussed the case study/ies and essay with the applicant and that it is the work of that individual.**

*Please sign below to verify the portfolio content as being undertaken by the applicant.*

|  |  |  |
| --- | --- | --- |
|  | **eSignature** | **Date** |
| **Sign Off Mentor:** |  |  |

**Please submit reference by email to the GCRAB Administrator (****enquiries@gcrab.org.uk****, preferably in PDF format) by 1st April.**

**If you cannot add an electronic signature please sign the form, scan it, and email the PDF.**