

REVALIDATION OF ACCIDENTS AND ILLNESSES ABROAD SPECIALIST STATUS

| PERSONAL DETAILS OF CANDIDATE | | PERSONAL DETAILS OF APPRAISER | |
|-------------------------------|--|--|--|
| Surname | | Surname | |
| First names | | First names | |
| Name of firm | | Name of firm | |
| Address | | Address | |
| APIL membership no | | APIL membership no (if appropriate) | |
| Signed | | Relationship of appraiser to candidate | |
| Date | | | |

1. Involvement with personal injury work

| | |
|---|----------|
| I confirm that: | Initials |
| <ul style="list-style-type: none"> • the candidate continues to be engaged in accidents and illnesses abroad work, which is predominantly for the claimant | |

4. Professional development to enhance knowledge and skills

The following are regarded as behaviours demonstrating effective professional development and self-awareness:

- You are active in keeping up to date with developments in accidents and illnesses abroad law, through reading journals and participation in conferences and training, and you are always willing to share your expertise with colleagues.
- You play an active part in accidents and illnesses abroad groups such as PEOPIL, as a means of maintaining professional contacts in the field, and of contributing to the work of such organisations.

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|--|----------|
| I confirm that: | Initials |
| <ul style="list-style-type: none">the candidate continues to display the above behaviours. | |

8. File review

| | |
|--|----------|
| I confirm that: | Initials |
| <ul style="list-style-type: none">I have reviewed a sample of the accidents and illnesses abroad files of the candidate and I have found the advice offered to clients to be adequate and appropriate. | |

CONCLUSION

I have conducted a face-to-face appraisal with the candidate and I have reviewed with him/her the quality of their professional work in accidents and illnesses abroad, as evidenced by the files for which he/she has been responsible over the past five years, and feedback on these; and his/her participation in continuing professional development.

In the light of this review:

EITHER*

| | Signed | Date |
|--|--------|------|
| I recommend that the candidate be revalidated by APIL as an Accredited Accidents and Illnesses Abroad Specialist | | |

OR*

| | Signed | Date |
|--|--------|------|
| I cannot recommend revalidation because: | | |
| <ul style="list-style-type: none"> My review of the candidate's accidents and illnesses abroad files discloses inadequate or inappropriate advice to clients, anonymised details of which are given on the attached sheet. | | |
| <ul style="list-style-type: none"> I am not satisfied that those of the behaviours above, which I have <u>not</u> initialled, are adequately displayed in relation to the candidate's accidents and illnesses abroad work, for the reasons given on the attached sheet. | | |
| <ul style="list-style-type: none"> The candidate no longer undertakes a sufficient amount of accidents and illnesses abroad work to provide evidence of effective deployment of the behaviours above. | | |

*Delete as appropriate