

IV VERIFICATION SAMPLING RECORD

Centre Name: _____ Sheet _____ of _____

Site Name: _____ Date: _____

NVQ/SVQ Ref: _____ Level: _____

Centre Number: _____

Assessor Name/Ref: _____ Internal Verifier Name/Ref: _____

<p style="text-align: center;">Assessor (A) Units achieved</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">D32</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; padding: 2px;">D33</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; padding: 2px;">None</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table> <p style="text-align: center;">Own Internal Verifier (IV) Units achieved</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">D32</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; padding: 2px;">D33</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; padding: 2px;">D34</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> <td style="border: 1px solid black; padding: 2px;">None</td> <td style="border: 1px solid black; width: 20px; height: 15px;"></td> </tr> </table>	D32		D33		None		D32		D33		D34		None		<p style="text-align: center;">If no units achieved; is 'A' registered and Action Plan available</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">YES</td> <td style="border: 1px solid black; padding: 2px;">NO</td> </tr> </table> <p style="text-align: center;">; is 'IV' registered and Action Plan available</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">YES</td> <td style="border: 1px solid black; padding: 2px;">NO</td> </tr> </table>	YES	NO	YES	NO
D32		D33		None															
D32		D33		D34		None													
YES	NO																		
YES	NO																		

FOR SAMPLED UNITS ENTER THE UNIT NUMBER (S)													Portfolio Examined	IV agrees with assessment decision		Total No. of units for the candidate		
														YES	NO			
CANDIDATE NAME	TICK UNITS SAMPLED FOR EACH CANDIDATE																	
1																		
2																		
3																		
4																		
5																		
6																		
7																		
8																		
9																		

FOR THE ABOVE SAMPLE ANSWER YES (Y) OR NO (N) IN BOXES BELOW			
Were all candidates registered?	Were all records legible and accurate?	Was underpinning knowledge met?	
Were all assessment plans satisfactory?	Was all evidence linked to unit criteria?	Was documentation stored securely?	
Were original GQA booklets available?	Were all performance criteria met?	Was there evidence that the candidate received feedback?	
Were all documents correctly completed?	Were all evidence requirements met?	Were equal opportunities monitored?	

<p>ANSWER YES (Y) OR NO (N) IN BOXES BELOW IF ALL EVIDENCE WAS: -</p> <table style="width: 100%; text-align: center; margin-top: 10px;"> <tr><td style="border: 1px solid black; padding: 5px;">VALID</td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> <tr><td style="border: 1px solid black; padding: 5px;">SUFFICIENT</td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> <tr><td style="border: 1px solid black; padding: 5px;">AUTHENTIC</td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> <tr><td style="border: 1px solid black; padding: 5px;">CURRENT</td><td style="border: 1px solid black; width: 20px; height: 15px;"></td></tr> </table>	VALID		SUFFICIENT		AUTHENTIC		CURRENT		<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left; border-bottom: 1px solid black;">TICK ASSESSMENT METHODS USED</th> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">WHICH CANDIDATES WERE</th> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">(D32) OBSERVATION</td> <td style="border: 1px solid black; padding: 2px;">(D33) APL</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">WRITTEN QUESTIONS</td> <td style="border: 1px solid black; padding: 2px;">SIMULATION</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">ORAL QUESTIONS</td> <td style="border: 1px solid black; padding: 2px;">PROJECTS/ASSIGNMENTS</td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">EXAMINE PRODUCTS</td> <td style="border: 1px solid black; padding: 2px;"></td> <td style="border: 1px solid black; padding: 2px;"></td> </tr> <tr> <td colspan="2" style="border: 1px solid black; padding: 2px;">FEEDBACK AND ACTIONS</td> <td style="border: 1px solid black; padding: 2px;">COMMENTS</td> </tr> <tr> <td colspan="2" style="border: 1px solid black; height: 40px;"></td> <td style="border: 1px solid black;"></td> </tr> <tr> <td colspan="2" style="border: 1px solid black; padding: 2px;">Does this assessor have any identified training needs?</td> <td style="border: 1px solid black; text-align: center;"> <table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;">YES</td> <td style="width: 20px;"></td> <td style="width: 20px;">NO</td> <td style="width: 20px;"></td> </tr> </table> </td> </tr> <tr> <td colspan="2" style="border: 1px solid black; padding: 2px;">Have any appeals been made against this assessor?</td> <td style="border: 1px solid black; text-align: center;"> <table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;">YES</td> <td style="width: 20px;"></td> <td style="width: 20px;">NO</td> <td style="width: 20px;"></td> </tr> </table> </td> </tr> <tr> <td colspan="3" style="border: 1px solid black; padding: 2px;">IV Name: _____ Licence No: _____</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; padding: 2px;">Signature: _____</td> </tr> </table>	TICK ASSESSMENT METHODS USED	WHICH CANDIDATES WERE		(D32) OBSERVATION	(D33) APL		WRITTEN QUESTIONS	SIMULATION		ORAL QUESTIONS	PROJECTS/ASSIGNMENTS		EXAMINE PRODUCTS			FEEDBACK AND ACTIONS		COMMENTS				Does this assessor have any identified training needs?		<table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;">YES</td> <td style="width: 20px;"></td> <td style="width: 20px;">NO</td> <td style="width: 20px;"></td> </tr> </table>	YES		NO		Have any appeals been made against this assessor?		<table style="width: 100%; text-align: center;"> <tr> <td style="width: 20px;">YES</td> <td style="width: 20px;"></td> <td style="width: 20px;">NO</td> <td style="width: 20px;"></td> </tr> </table>	YES		NO		IV Name: _____ Licence No: _____			Signature: _____		
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