

Qualification Approval Application Form

Ofqual, Qualification Wales, CCEA Regulated & Non-Regulated Provision



This document should be completed if you are a recognised Ascentis centre and you wish to deliver additional Ascentis qualifications.

PART A About the Centre

A1 Centre Information

Centre Name	Company Registration No. (if applicable)
Centre Address	Telephone
	Website
Invoice Address (if different from above)	Email
	Centre Contact (for the purpose of Qualification approval)

Type of Education Provider

FE College
 Sixth Form College
 Adult Community Learning
 Private Training Provider
 Other - Please provide details
 HE Institute

State the number of years trading.

Will you be bringing overseas learners to the UK? Yes* No

*If yes is the centre on the Register of Sponsors Licensed Under the Points-Based System? Yes** No

**If yes, is the centre accredited by any of the following? (tick any that apply) ASIC BAC BC

A2 Partnership Organisation(s), additional Satellite Sites

Does the centre intend to work in partnership, or subcontract, with any other organisation(s) for the delivery of Ascentis Ofqual/QW/CCEA regulated qualifications? Yes* No

*If yes, I confirm there is a Partnership agreement in place. Yes No

A2.1 Details of Partnership Organisation(s) (Ofqual/QW/CCEA regulated & non regulated provision only)

Name of Partnership Organisation	
Address	
Contact Name	Telephone
Job Title	Email
Role and responsibilities of Partner	

A2.2 Details of Satellite Site(s)	
Will the provision be delivered over multiple satellite sites? <input type="checkbox"/> Yes* <input type="checkbox"/> No *If yes, please provide details below	
Name of Satellite Site(s)	
Address	
Contact Name	Telephone
Email	
Role and responsibilities of Satellite Site(s)	
Could you please confirm if your Centre will use these additional sites to conduct externally set assessments, and state how you intend to manage the security of assessment materials, and conduct of assessment across the sites.	

PART B Qualification(s) Approval

B1 Please list the Ascentis qualifications you are applying to deliver as part of the qualification approval process.

B1.1 Qualification Title	Ofqual/QW/ CCEA Code	Level	Proposed Start date	Anticipated Learner Numbers

B1.2 Explain how this/these qualification(s) fit into your existing curriculum

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B1.3 Outline how the qualification(s) will be delivered and assessed

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B1.4 Outline how the GLH/TQT will be met for each qualification	
B1.5 Data Management and Analysis	
Ascentis will collect and hold data on learners in strict confidence. The data will be used for purposes connected with learners' studies and for the generation of statistics. The data will not be disclosed to any third parties except where there is a statutory requirement to do so for example the DfES. Under the current Data Protection legislation the centre must ensure that learners are aware of how their personal data will be processed. As this includes sensitive personal data the learner must give their consent to this. The centre confirms it is in compliance with this requirement.	<input type="checkbox"/> Yes <input type="checkbox"/> No
B1.6 Facilities and Resources	
Describe the centres equipment and facilities including practical and IT workshops available to support delivery of the qualification(s) in this application.	

If approved qualifications do not have any registrations over a 2 year period, the qualification will expire from your account. If you did want to run it again, you would need to re-apply and complete another qualification approval form.

PART C Staffing Details

C1 List all members of staff involved in the delivery, assessment and quality assurance for each qualification applied for. The centre will make available, upon request from the EQA at a centre QA visit, CV's and Qualification Certificates of staff involved in the delivery, assessment and Internal quality assurance at the centre.

Qualification Title	Staff Name	Staff Role: Tutor/Assessor/Internal Verifier (Please indicate the staff member's role for the proposed provision)	Relevant Qualification(s) *	Relevant Experience

* You must attach staff CVs when submitting the application form

C1.1 Are there any conflicts of interest within the staff team at your Centre?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If so, please give examples of how you intend to mitigate any potential risk.	

PART D Declaration

D1 Declaration

The Centre declares and confirms that the contents of this Qualification Approval form are accurate and complete.

This section is to be completed and signed by the Centre Coordinator.

I declare that I am authorised to sign on behalf of the Centre.

Centre Name *(please print in full)*

Management Role/Official Position

Name *(please print in full)*

Signature

Date

Please retain one copy for your records.

On completion please email this form to operations@ascentis.co.uk or post to:

Ascentis, Office 4, Lancaster Business Park, 8 Mannin Way, Caton Road, Lancaster, LA1 3SW

Internal Office Use Only - Outcome of Qualification Approval Review

Operations Team

Date form received in office	Quartz Centre ID	Date passed to QAM
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Quality Assurance Team

To be completed by the Ascentis QAM (Qualification Reviewer)	
Name of Centre	
Reviewer Name	
Is a visit required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
QAM Recommendation	
<input type="checkbox"/> Approved	Deferred <input type="checkbox"/>
QAM Comments	
EQA visit conducted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of EQA Allocated	
If deferred please provide details	
Additional comments	
Name of QAM Reviewer (<i>Please print</i>)	
Signature	Date

Operations Team

<input type="checkbox"/> Centre qualification(s) approval application and status updated on Quartz	
<input type="checkbox"/> Resource(s) attached to centre on Quartz – if relevant	
<input type="checkbox"/> Qualification(s) approval letter sent to approved Centre	
<input type="checkbox"/> Customer Support representative identified to centre	
<input type="checkbox"/> Deputy Commercial Director informed via email sarah-jane.fletcher@ascentis.co.uk	
CSA Name	Date