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| **Centre name** |  | **Centre number** |  |

This form should be retained by the centre and a copy sent to the Compliance Manager reviewing the submission for 2021.

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**AoPE  CoPE  Employability**

**PP2012  PP2020  PSD  WKS**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please list the candidate submission status that is being submitted for the 2020/21 academic year as **Complete (C) /Partially Complete (PA) /Unit Accreditation (UA)**. For more information, please see the **Centre Guidance to Awarding 2021**.

Requests for moderation based on a partially completed submission can only be provided to ASDAN, after the quality assurance process has been completed by the centre and must not, under any circumstances, be shared with learners, or their parents/carers or any other individuals outside the centre, before results have been reviewed and awarded by ASDAN.

*Please note that individual unit submission details must be provided on the Candidate Registration Form that has been emailed to you with this declaration. The Candidate Number is listed as the Learner ID on the Candidate Registration Form*

**Candidate Number**  **Qualification and Level**  **Status of completion**

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**Candidate Number**  **Qualification and Level**  **Status of completion**

**Candidate Number**  **Qualification and Level**  **Status of completion**

Should there be more than 15 candidates involved in this submission please duplicate this page.

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| **Authentication of candidate’s evidence:**  This declaration is to certify that assessments have been conducted in accordance with the specifications outlined in the Standards with Guidance or Specification and that every reasonable step has been taken to authenticate the evidence presented as the candidates own work.  Any assistance provided to the learner, including special consideration that deviates from the normal assistance provided to the class has been noted by the assessor on the assessment checklist – *Assessor Declaration*. The pass therefore has been awarded to reflect the candidate’s independent achievement of the learning objective. |

**Teacher/ Assessor Signatures** – those responsible for assessment

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| **Internal Standardisation of assessment:**  The centre has standardised assessment across different teachers/assessors in order to ensure that all candidates at the centre have been judged against the same standards. If two or more assessors are involved in the assessment of a candidate, one of them has been designated as responsible for standardising the assessments of all teachers/assessors. |

I confirm that the procedure described in the standards with guidance / specification has been followed to ensure that all assessments are of the same standard and that I have marked the work of the candidate. Should there be more than 4 teacher/assessors involved in this submission please duplicate this page.

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| |  | | --- | | **Teacher/Assessor 1** | | Teacher/tutor 1 signature | |  |   Print Name | |  | | --- | | **Teacher/Assessor 2** | | Teacher/Assessor 2 signature | |  |   Print Name |
| |  | | --- | | **Teacher/Assessor 3** | | Teacher/Assessor 3 signature | |  |   Print Name | |  | | --- | | **Teacher/Assessor 4** | | Teacher/Assessor 4 signature | |  |   Print Name |

**Internal Moderation Signatures** – those responsible for sampling and internal moderation

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| **Internal Quality Assurance:**  The centre has reviewed a sample of assessments and evaluated the assessment practices to determine that the assessment has been conducted in a consistent and fair manner. |

I confirm that the assessment practices have been followed consistently and fairly to ensure that all assessments are of the same standard and that I reviewed a sample of assessments to come to this conclusion.

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| |  | | --- | | **Internal Moderator 1** | | Internal Moderator 1 signature | |  |   Print Name | |  | | --- | | **Internal Moderator 2** | | Internal Moderator 2 signature | |  |   Print Name |

**Head of Centre declaration** (or a deputy where Head of Centre is not available)

*I confirm that the submission whether full or teacher assessment grades (TAGs) provided to ASDAN, and the evidence to support submission, have been checked for accuracy, reviewed by a second member of staff and are accurate and represent the professional judgements made by my staff, that entries were appropriate for each candidate and that each candidate has no more than one entry per qualification. Having reviewed the relevant processes and data, I am confident that they honestly and fairly represent the pass results that these candidates would have achieved if they had had their portfolio moderated as planned, and that they have not been disclosed to either the candidate or their parent/guardian.*

*I understand that ASDAN will conduct an evidence-based quality assurance review, and that, if the profile of results submitted is substantially different from what might be expected based on my centre’s historical results, and/or the evidence submitted does not meet the minimum evidential requirement, and/or does not allow a safe result for my candidates to be calculated, it will not be possible to provide a result for my candidates at the present time.*

**Head of Centre (or deputy):**

|  |
| --- |
| Signature |
|  |

Print Name

**Date:**

We trust that you have ensured that no learner was unfairly advantaged or disadvantaged. We may investigate any attempts to undermine this system which might be regarded as malpractice.

**Please email this document to** [compliance@asdan.org.uk](mailto:compliance@asdan.org.uk) **within 5 days of receipt of this form. This can be emailed with the updated Candidate Registration Form.**