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| **INTERNAL VERIFICATION FOR QUALITY ASSURANCE OF ASSIGNMENT BRIEF** |
| Qualification Title & Number |  |
| Assessor |  | IVQA |  |
| Unit Name & reference  |  |
| Learning outcomes covered  |  |
| **Did you follow any assignment brief previously delivered by B-TIC for this unit? ( explain the deviation)** | **Yes ( Explain)**  | **NO**  |
|  |  |
| **CHECKLIST**  | **Yes** | **No** | **Comments** |
| B-TIC and centre has or can acquire adequate resources to deliver assessment effectively and efficiently with manageable cost. E 4.1 & E4. 2 b, c |  |  |  |
| Compatible to make Reasonable Adjustments while minimising the need for them, E4. 2 d | G 9.2 C |  |  |  |
| (e) Learner can generate valid evidence demonstrating assessment requirements to meet the all learning outcomes up to the higher grades which can be Authenticated E4. 2 e | G 9.2 C |  |  |  |  |
| (f) learners are able to reach specified level of attainment. E4. 2 G 9.2 d |  |  |  |
| (g) Assessors to be able to differentiate accurately and consistently between a ranges of attainments by Learners. E4. 2 G 9.2 e |  |  |  |
| information available on:* Issue date & deadline
* the weighting of the assessment
* assessors name G 9.2
* submissions and re-sits G.9.2
* Submission format
* Evidence to submit
 |  |  |  |
| Adequate time given to prepare and review before submission |  |  |  |
| Assessment method is appropriate G 1.1 b | G 9.3 b |  |  |  |
| content of the assessment is consistent with the specification for that qualification G 1.1 | G 9.3 c |  |  |  |
| Language of assessment is appropriate, clear and unambiguous G2 |  |  |  |
| Case study, vocational scenario or context are appropriate, relevant, and current. |  |  |  |
| Marking rubric provided for marking |  |  |  |
| Choose one below as appropriate  |
| The assignment is fit for the purpose and authorised for delivery (E 4.2) G 1.1 a |  |
| The assignment brief is not fir for the purpose and I recommend the following action to be complicated  |  |
| **IVQA Signature** |  | **Date** |  |

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| **Action to be completed:** | **Date for Completion** | **Date Completed** |
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| **General Comments (if appropriate)** |
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| Note:- The Assessor and the IVQA shall confirm the actions(s) completed to authorise delivery of assignment brief.**Assignment Brief Authorised for delivery** |
| **IVQA signature** |  | **Date** |  |
| **Assessor signature** |  | **Date** |  |

*(If none or does not apply then please state N/A)*