Adaptations to Conditions of Assessment Request and Evaluation Form.

This form is to provide SQA with details on any proposed adaptations to conditions of assessment to help you align with subject specific guidance issued by SQA or any regulatory guidelines.

Please click on this link for regulator guidelines.

Please click on this link for subject specific guidelines.

Should you have any questions regarding this please contact QVPrior@sqa.org.uk

Once you have completed this form, we can determine where you may, or may not, require support on your verification journey, ensuring that any adaptations made adhere to published guidance.

The form is split into two sections:

Section 1 – Adaptations to Conditions of Assessment Request

Centres will use this section when submitting their request for proposed adaptations to be considered

Section 2 – Adaptations to Conditions of Assessment Evaluation

External Verifiers will use this section to report their findings on review of the proposal

How to use this form.

- This Form should be completed and submitted by SQA Coordinators only.
- If required, please complete additional details in the general comment box on page 3, with qualification requirements and unit specification included
- The unit specification/qualification requirement must be adhered to and supporting documents detailing adaptations must be submitted with this form, if relevant

Once this form is complete, please email it to: QVPrior@sqa.org.uk The details you complete in this form, as well as any supporting documents you send will be treated as private and confidential by SQA.

Section 1 - Adaptation Request

1.1 Centre Details

Centre Name Centre Number SQA Co-ordinator Contact Tel. Number Email Address

1.2 Previous Submission Details

Has this or any other adaptation previously been submitted for this Unit?

Yes No If No, Please progress to section 1.3

Please detail the materials previously submitted

Submission Date:

1.3 Product Details

Course Title
Unit Title
Code & Level (e.g. A1234 04)
Estimated start date for assessment of this
unit?

Is the adaptation to be made to a current:

Yes No

Does the adaptation replace a closed book assessment?

Does the adaptation replace a face-to-face 'live' assessment?

Does the adaptation replace fully, or in part, an existing 'live' assessment with a remote online assessment?

Yes No

If online, is the candidate likely to have issues relating to technology, space, environment or resources?
Comment:
General Comments
Please provide any general information relevant to your submission:
1.4 Declaration
As a result of Internal Verification, I declare this adaptation to conditions of assessment submission to be fit for purpose and the information provided within this form to be accurate
Internal Verifier Name:
Date:

Section 2 – Adaptation to Conditions of Assessment Evaluation

Unique Identification No (SQA WILL ALLOCATE):

2.1 S	QA Re	presen	tative	Eval	uation
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Decision

Comments:

2.2 External Verifier Evaluation.

SQA Representative

This section should not be completed if a decision is provided in 2.1

Please indicate the appropriate response to items providing details of your evaluation.	1-6 and complete each section,
1. Is the adaptation to conditions of assessment appropriate t	o purpose?
2. Does it continue to meet the required standard, as outlined	in the assessment strategy?
3. Is the assessment still accessible to all candidates who are unnecessary barriers/conforms to Equal opportunities guidel	
4. Does the evidence show that the adapted assessment main	ntains the required SCQF Level?
Conclusions Please confirm if the Amendment to Conditions of Assessment ensure you have given clear advice and guidance to the centr	
2.3 Confirmation	
Verifier Name	Date

Date