





Prior Verification Request Form

What this form is for

This form is for centres who wish to provide SQA with information about assessment materials they have developed or modified, which can then be reviewed prior to use.

How to use this form

- This Form should be **completed and submitted by SQA Coordinators only**. Submission from anyone other than the SQA Coordinator will be returned unprocessed
- Only one Unit per Prior Verification Request Form is permitted
- A separate Prior Verification Request Form must be submitted for each Instrument of Assessment
- For purposes of reassessment the Instrument of Assessment must differ significantly from the original
- The Unit specification must be adhered to for centre devised Instruments of Assessment
- For more information about Prior Verification, please visit the SQA website
- This form is to be completed electronically. Please make sure that you are using Adobe Reader 9 or later. This can be downloaded free of charge from the [Adobe website](#) 
- Certain supporting documents must be submitted with this form. These will be indicated by the symbol:- 

When you have finished

Please send your request and materials for Prior Verification either by email to gvprior@sqa.org.uk, or by post to:

Qualification Verification Team
Scottish Qualification Authority
The Optima Building
58 Robertson Street
Glasgow
G2 8DQ

All the details you complete in this form, as well as any supporting documents you send, will be treated as **private and confidential** by SQA.

1. Centre Details

Centre Name

Centre Number

SQA Coordinator

Contact Tel. Number

Email address

2. Qualification Verification Required Actions

Does this request link to an ongoing required action raised at Qualification Verification?

Yes

No

3. Previous Submission Details

Has this or any other assessment material previously been submitted for this Unit?

Yes, please specify details below

No, please continue to section 3

Material previously submitted
(e.g. Outcome 1 & 2)

Date material submitted to SQA

4. Product Details

Unit Title
(e.g. 'Administration')

Unit Code & Level
(e.g. A123 04)

Unit Type
(SQA Advanced Qualifications or NQ)

Please specify all aspects of the Unit included in its assessment which you have developed or modified (e.g. Outcome 1, 2 & 3)

Estimated start date for Assessment of this Unit

5. Approval

Are you already approved to offer this Unit?	Yes	No
If no, are you currently seeking approval status?	Yes	No

6. Sharing of Assessment Instruments

Please tick to confirm that your centre is happy for the assessment material provided to be shared with other SQA approved Centres after its acceptance by SQA.

7. Declaration





I declare that, as a result of internal verification, I consider the assessment material presented to be fit for purpose and the information on this form is correct.

Internal Verifier

Date

Checklist

Please attach the following mandatory documents to this request:–

	Descriptive document name	File name
	Instruments of Assessment (where applicable, assessment conditions must be described)	
	Sample Solutions	
	Marker Schemes (Not applicable for project based quals)	
	Internal Verification Reports	

Note – If any of the above documents are not provided, the other material will be returned without prior verification.

SQA Use Only

Date received
Received by
Verification group
number
Verification group name
Date sent to EV
Date returned from EV
Date sent to Centre