


Devolved Authority Qualification Approval Application Form

What this form is for

This form is to be used by an approved SQA centre with devolved authority to request devolvable Group Award and/or Units be added to their approval list.

How to use this form

- 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](#) 

When you have finished

Once this form is complete, please email it to asv@sqa.org.uk

Once we have processed the completed form, we will contact the SQA Coordinator by email to confirm if the request has been approved or if further information is required.

All the information you have provided on the form will be treated as **private and confidential**

1. About Your Centre

Centre Contact Details

Please provide details for the main site/location or headquarters for your centre:

Centre's full name	<input type="text"/>
Centre number	<input type="text"/>
SQA Co-ordinator	<input type="text"/>
Phone number	<input type="text"/>
	Please include the area code e.g., +44 141 123 4567
Email address	<input type="text"/>

2. Qualification(s) you wish to offer

Qualification and Units

If you are providing **stand-alone Units** independent of a qualification, please put 'not applicable' as the Qualification Title and leave the qualification code and level blank.

Qualification Title

e.g., Management

Product Code

e.g., GB1T 23

Projected number of candidates within first year

Unit Title e.g., Manage your own resources and professional development	Product Code e.g., DR67 04
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3. E-assessment

Some SQA qualifications are externally assessed using e-assessment systems, such as SOLAR and Safe Road User Online.

If your centre intends to use e-assessment systems, please [connect to SQA Solar](#) to request access. Please note that you should familiarise yourself with the training materials prior to requesting access.

If you already have Solar access, please complete an [Additional Subject Request](#) to add the required subjects to your access.

4. Declaration

Here we ask either your Head of Centre or your SQA Coordinator (as specified at the beginning of this form) to accept and date a declaration regarding the accuracy of this application.

I declare that, to the best of my knowledge, the information given in this approval application and on any accompanying documents is correct.

We have followed internal approval procedures and request SQA to add the above award and Units to SQA's approval records for our centre.

I have read and have a clear understanding of the current Assessment Strategy pertaining to the SVQ(s) involved in this notification of approval and intend to comply with its contents. This includes any additional requirements for the occupational competence of Assessors/Verifiers, performance evidence and the use of simulation.

Please select one of the following responses:

- I accept the declaration above.
- I do not accept the declaration above.

Name Date