



Development Visit Request and Report Form (SfW/NQ Awards)

Introduction

This form is for use by SQA centres to request a Qualifications Development Visit. It will subsequently be used to plan the visit and then to record the discussions which took place and any advice given during the visit.

Important Notes – To complete this form electronically please make sure that you are using Adobe Reader 9 or later. This can be downloaded free of charge from the [Adobe website](#).

Development visits are solely intended to provide advice and support to centres on the delivery of internally assessed units/courses. The visiting External Verifier is not able to discuss estimates, set examinations, appeals or other matters more appropriately handled by other SQA departments.

The cost of a development visit is £100 for each External Verifier required, with the visit expected to last for half a day. An invoice for the agreed amount will be sent to the centre's SQA Coordinator after the visit.

Section 1 – Development Visit Request

The centre should complete Section 1 electronically, and then email the whole form to NQ Verification nqverification@sqa.org.uk

Centre Details

Name

Number

Address

Post/Zip code

Country

Tel. No.

SQA Coordinator

Name

Email address

Contact for Visit

Name

Position

Suggested Dates(s) and Time(s) of Visit

Site(s) to be Visited

Background to Development Visit Request

To allow SQA to deploy the appropriate resource, please indicate the qualification type that you want to discuss and specify the subject area (e.g. Accounting) and Verification Group.

SfW/NQ Award Subject area

Verification Group

Code	Level	Title

- Are you an Approved SQA centre? Yes No
- Are you looking at delivering new qualifications? Yes No
- Is this request pre or post Qualification Approval? Pre Post
- Is the visit required following verification activity for these qualifications? Yes No
- Have there been any recent staff changes Yes No
- How many staff will be present for the visit?

Please provide details of the members of staff who will be in attendance during the visit.

Name	Role (in relation to the qualifications)	Name	Role (in relation to the qualifications)

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Please detail what specific area(s) of delivering the qualifications you require support for.

Please detail what outcomes you expect to be achieved by the development visit.

Declaration (Centre Coordinator)

I declare that I have read this request and agree that it should be submitted to SQA. I also agree that the centre will be liable for the cost of the visit which will be confirmed by SQA in advance.

Name of Centre Coordinator

Date

Use dd/mm/yyyy format

Thank you for completing this section of the Development Visit Request and Report Form.

Please email the whole form to nqverification@sqa.org.uk.

Section 2 – Development Visit Action Plan

This section should be completed by the NQ Verification Team within SQA.

Visit setup

Date request received by NQV

Date allocated to External Verifier(s)

Allocated by (NQV admin)

External Verifier's Name

Verification Group Name

Verification Group Number

Section 3 – Development Visit Report

This section should be completed by the External Verifier who undertakes the visit.

Centre Name

Centre Number

External Verifier Name

Verification Group

Qualification Type

Date of Visit

Use dd/mm/yyyy format

Please give details of the qualifications which were the subject of the visit and summarise your discussions, noting where they relate to the expected outcomes listed in the visit request. Also highlight any development issues which were raised.

Please complete in essay format and restrict the summary to internally assessed units/courses/assessment instruments/unit spec/standards/assessment strategy only.

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Please detail any further support that SQA could provide for this centre.

Declaration (External Verifier)

I declare that this report is an accurate account of the Development Visit

Name of External Verifier

Date

Use dd/mm/yyyy format

Once this report has been completed please email it to nqverification@sqa.org.uk

Report Confirmation (to be completed by SQA NQ Verification staff)

Date report received

Use dd/mm/yyyy format

Authorised by (NQV supervisor)

Date report sent to centre

Use dd/mm/yyyy format