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**SQA Form CM1**

# SQA/CM1

## Suspected or Confirmed Candidate Malpractice

### Higher National (HN) and Vocational Qualifications

**Confidential**

SQA requires centres to have policies and procedures to investigate concerns of candidate malpractice, and to manage this appropriately within the centre.

This form is to be used by centres to report the findings of a centre-led investigation into an instance of suspected or confirmed candidate malpractice.

#### For qualifications regulated by SQA Accreditation, Ofqual and Qualifications Wales:

Centres must notify SQA of all concerns of potential candidate malpractice as soon as an initial screening exercise has been completed regardless of whether the result has been entered on SQA system. All information and evidence should be sent promptly, fully and openly to SQA.

#### For self-regulated qualifications:

Centres must notify SQA of all concerns of potential candidate in internal assessments where they have come to the centre’s attention after submission of marks or results.

When SQA is notified directly of any concern of potential malpractice, we may request further information about the concern. SQA may also initiate a direct investigation at a later stage if we decide that an investigation led by a centre, or third party has not been completed in line with our Standards for Devolved Investigations or has left questions unanswered.

#### Please submit completed form or any questions to

[**candidate.malpracticehnvq@sqa.org.uk**](mailto:candidate.malpracticehnvq@sqa.org.uk)

For guidance on how to complete this form please seeNotes on completingform **SQA/CM1.**

#### Centre information

Centre number

|  |
| --- |
|  |

| **Centre name and address** |
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| **Date or period of incident** |
| --- |
|  |

|  |  |
| --- | --- |
| **SQA Co‑ordinator name** | **SQA Co‑ordinator email address** |
|  |  |

|  |  |
| --- | --- |
| **Investigating officer** | **Position** |

#### How many candidates are involved in this malpractice concern?

|  |
| --- |
|  |

| **Candidate SCN(s)** | **Candidate name(s)** | **Suspected / confirmed** |
| --- | --- | --- |
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#### What qualifications are potentially involved in this malpractice concern?

|  |  |
| --- | --- |
| **Qualification code** | **Qualification title** |
|  |  |
|  |  |
|  |  |

| **Unit code** | **Unit title** |
| --- | --- |
|  |  |
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#### Who detected the instance of potential malpractice?

|  |  |  |
| --- | --- | --- |
| **Name** | **Role** |  |
|  | Assessor |  |
|  | Internal Verifier |  |
|  | Head of Centre |  |
|  | Invigilator |  |
|  | Other Candidates |  |
|  | Whistle-blower |  |
|  | Other (Please specify): |  |
|  |  |  |

#### Describe the nature of the suspected candidate malpractice including details of how it was discovered and when.

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| --- |
|  |

#### Please specify type of assessment (eg written project, practical, exam, online test)

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#### What were the conditions of assessment?

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|  |

#### Describe how candidates were made aware of any relevant examination or assessment conditions.

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#### What preventative steps were taken to discourage candidates from undertaking malpractice?

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| --- |
|  |

#### Does the incident involve the personation of another candidate?

|  |  |
| --- | --- |
| YES |  |
| NO |  |

#### If the answer to the above question is yes, what steps were taken to authenticate the identity of the candidate?

|  |
| --- |
|  |

#### If the incident involves the introduction of unauthorised material, is the unauthorised material enclosed? (eg use of current or past candidate’s portfolio, unauthorised aids)

|  |  |
| --- | --- |
| YES |  |
| NO |  |

#### If the answer to the above question is no, please give details below of the nature of the unauthorised material.

|  |
| --- |
|  |

#### If the case involves plagiarism, please provide full details (title, author, edition, website etc) of the material plagiarised and include copies if possible.

|  |
| --- |
|  |

#### If there are any other details you feel are relevant to this allegation, including mitigating circumstances, please give further information below.

|  |
| --- |
|  |

#### What further steps have the centre put in place to mitigate future malpractice concerns?

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|  |

**How can SQA continue to support the centre to ensure the safety of assessment/verification practice?**

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|  |

**Detail any Malpractice policy and procedure CPD training undertaken by the assessors/verifiers within the centre? (Example: Do new staff receive induction training and are the Malpractice policies and procedures covered within this training?)**

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#### Supporting evidence

Please indicate below the supporting evidence submitted with this report. All relevant information and materials **must** be submitted at this time. Evidence submitted subsequently may not be considered.

If submitting this form by e-mail, please ensure that all supporting documents are scanned and attached (preferably as PDF documents) to the same e-mail.

|  |  |
| --- | --- |
| **Evidence submitted with this form** |  |
| Statement(s) from invigilator(s), if appropriate |  |
| Statement from tutor/head of subject/assessor/internal verifier |  |
| Statement(s) from candidate(s) |  |
| Statement from employer, if appropriate |  |
| Seating plan of examination room, if appropriate |  |
| Unauthorised material removed from the candidate(s) |  |
| Copies of sources of plagiarised material |  |
| Assessment and Internal Verification records |  |
| Other (please give details): |  |
|  |  |
|  |  |

If statement(s) from the candidate(s) is/are not enclosed, please put a cross in this box to indicate that the candidate(s) has/have been given the opportunity to make a statement but has/have chosen not to do so.

##### To be completed by the head of centre

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Date** |  |

*\*Submission by e-mail from the centre’s registered e-mail address will be accepted in place of a signature*

## Notes on completing form SQA/CM1

This form must be used by the head of centre or authorised deputy, to notify SQA of an instance of suspected candidate malpractice in the conduct of assessments or examinations. It can also be used to provide a report on investigations into instances of confirmed candidate malpractice.

Reports on investigations from centres **must** include:

* a detailed account of the circumstances surrounding the suspected candidate malpractice.
* the procedures for advising candidates of the regulations concerning the conduct of examinations and or assessments.
* a report of any investigations carried out subsequently by the centre.
* signed and dated statements from the staff concerned (e.g., invigilators, assessors, teachers, tutors etc)
* signed and dated statements from the candidate(s) concerned or a clear indication that they have been given the opportunity to make a statement; (In circumstances which make it inappropriate to interview the candidate, the centre should discuss the case in confidence with SQA)
* seating plans of the examination room (if appropriate)

This form is intended to be used as the basis for the report.

**This form should be submitted by email to** [**candidate.malpracticehnvq@sqa.org.uk**](mailto:candidate.malpracticehnvq@sqa.org.uk) **Submission by email from the centre’s registered e-mail address will be accepted in place of a signature. When submitting the form by e-mail, all supporting documents should be scanned and attached (preferably as PDF documents) to the same e-mail. The originals should be retained within the centre. SQA will acknowledge receipt of this form.**

### Checklist for the reporting of suspected candidate malpractice

This checklist is intended to assist centres when completing a report of suspected candidate malpractice.

**It is the responsibility of the head of centre to ensure that these requirements have been met.** Please indicate by putting a cross in the appropriate box for the following points:

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| The candidate(s) has/have been informed of their individual responsibilities and rights |  |  |
| The candidate(s) has/have been informed (preferably in writing) of the allegation made against them |  |  |
| The candidate(s) know(s) what evidence there is to support the allegation |  |  |
| The candidate(s) know(s) the possible consequences should malpractice be proven |  |  |
| The candidate(s) has/have the opportunity to consider their response to the allegations (if required) |  |  |
| The candidate(s) has/have had an opportunity to submit a written statement |  |  |
| The candidate(s) has/have had an opportunity to seek advice (as necessary) and to provide a supplementary statement (if required) |  |  |
| The candidate(s) has/have been informed of the applicable appeals procedure should a decision be made against him or her; |  |  |
| The candidate(s) has/have been informed of the possibility that information relating to a serious case of malpractice may be shared with other awarding bodies, regulators, and other appropriate authorities. |  |  |