



Qualification Approval Form (for CACHE centres only)

Qualification Approval for CACHE Centres

Approval information provided will be transferred to CACHE Info-Path Self Assessment Form. (SAF)

Site/Centre Name (In Full)		CACHE Site/Centre Code:		
Qualifications			Centre Type	
Name the Qualification/s you are seeking approval for:	Date of registration for qualification (approximately)	Expected Learner numbers (approximately)	Indicate by X the appropriate box	
			01 School	08 Voluntary Org
			02 FE Tertiary College	09 Employer
			03 Sixth Form College	10 HM Prison/Youth Offenders
			04 Adult Education Centre	11 Armed Forces
			05 University or HE Centre	12 Overseas Centre
			06 Private Training Provider	13 Other (Please Specify)
			07 Local Government Central NHS	

Information Technology

Please state which Information Technology Platform is used by the examination department:

KEY INFORMATION

Please provide a brief outline of the organisational structure relating to qualification delivery and assessment. Include details of partners and satellite sites affiliated to the Centre:

Centre's Key Contact Details below:			
Name of Head of Organisation (the person with overall responsibility)		Email Address	
Name of Applicant Person applying for centre approval		Email Address	
Name of Examination Officer The person responsible for learner administration		Email Address	
Name of Quality Assurance Nominee Person responsible for Quality Assurance		Email Address	
Centre Address:		Address of site(s) where qualification is delivered (if different)	
County		County	
Postcode		Postcode	
Telephone Number:		Telephone Number:	
Fax Number:		Fax Number:	
Email Address		Email Address	
<p>Centres need to complete the e/ngage forms, for all standards, with Learner transactions. For example: Registration of Learners, external assessment entry, internal grade entry and certificate requests via the CACHE web portal – e ngage. Extra individual forms have to be completed by Internal Verifiers and Moderators to declare their status. An individual user code will be issued to access the system</p>			

Centre agreement and declaration to CACHE terms and conditions

CACHE reserve the right to examine all documentation detailed within this application in the course of the recognition process and during the post-recognition monitoring activity.

I[insert name of head of centre] declare that this centre agrees to adhere to the procedures and policies of CACHE in respect of this application, and accept that if the centre defaults on the commitments made in this application it may lead to the removal of its recognition status.

I confirm that the centre understands that if this application is accepted it will form the contract between the centre and CACHE.

I agree to provide the Regulatory Authorities and CACHE with access to premises

I declare that I am authorised by the above centre to supply the information given above and, at the date of signing, the information provided is a true and accurate record to the best of my knowledge.

Signature:	Date:	Job role:	Title:
CACHE USE ONLY	Name of Regional Manager agreeing Recognition of the centre:	Name of Centre Advisor to approve qualification:	Date: