**INTERNAL VERIFIER CHECKLIST**

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**Initial Documentation Check**

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| **PRESENT IN THE PORTFOLIO** | **YES** | **NO** | **COMMENTS** |
| Candidate Assessment Record |  |  |  |
| Assessment Plan(s) |  |  |  |
| Summary Assessment Matrices |  |  |  |
| Candidate Feedback Forms |  |  |  |
| Witness List |  |  |  |
| Appeals Procedure |  |  |  |
| Internal Verification Sampling Report Forms |  |  |  |

**Secondary Documentation Check**

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| **FORM** | | **YES** | **NO** | **COMMENTS** |
|  | **Assessment Plan** | | | |
| Has the assessor signed and dated the plan when it was originally agreed? | |  |  |  |
| Has the candidate signed and dated the plan when it was originally agreed? | |  |  |  |
| Has the assessor signed and dated the plan when it was fully completed? | |  |  |  |
| Do the assessment dates link into the Summary Assessment and Feedback Forms? | |  |  |  |
| Have you validated the assessment plan? (Signed and dated) | |  |  |  |
| **SUMMARY ASSESSMENT MATRICES** | | **YES** |  | **COMMENTS** |
| Is the candidate/assessor/IV information complete? | |  |  |  |
| Is the ‘Authority’ box complete? | |  |  |  |
| Are all assessment dates listed? | |  |  |  |
| Are the additional assessment methods listed?  (Observations, witness testimonies, questioning, etc.) | |  |  |  |
| Do assessment dates link into the Assessment Plan(s) and Candidates Feedback Forms? | |  |  |  |
| Has feedback been given within one week of the dates listed? | |  |  |  |
| Have you entered your sampling date? | |  |  |  |
| Have you ‘signed off’ the matrix when complete? | |  |  |  |
| **CANDIDATE FEEDBACK FORMS** | | **YES** | **NO** | **COMMENTS** |
| Has the assessor signed and dated each form? | |  |  |  |
| Has the candidate signed and dated each form? | |  |  |  |
| Is the Form Reference section completed? | |  |  |  |
| Has the feedback been presented within one week of the assessment taking place?  (Refer to the dates on the Summary Assessment Matrices) | |  |  |  |
| Do the feedback forms link back to the Assessment Plan(s) and Summary Assessment Matrices? | |  |  |  |
| Is it clear what evidence has been assessed during each assessment? | |  |  |  |
| Is it clear when competence has been confirmed? | |  |  |  |
| Have you validated each form?  (Signed and dated) | |  |  |  |
| **WITNESS LIST** | | **YES** | **NO** | **COMMENTS** |
| Are all the witnesses listed? (Used for observations, witness testimonies, questioning, etc., (Refer to the Summary Assessment Matrices) | |  |  |  |
| Does it reflect the Summary Assessment Matrices? (Observations, witness testimonies listed as evidence) | |  |  |  |
| Have you validated the form?  (Signed and dated) | |  |  |  |

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| Verifier’s Name: |  |
| Verifier’s Signature: |  |
| Date: | Click or tap to enter a date. |