



## APPLICATION FORM

**SPECTATOR SAFETY MANAGEMENT LEVEL 4 NVQ - ASSESSMENT ONLY**

Date:	Anticipated start date:	Cost: <b>£1,420 + VAT</b> Excludes Assessors travel & accommodation outside of GB
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**YOUR DETAILS**

Title:	Date of Birth:
Surname:	Forename(s):
Address:	
County:	Postcode:
Country:	Telephone number*:
Email:	
Job title:	
Organisation or Company: :	
Address:	
County:	Postcode:
Country:	Telephone number*:

\*We require this information to contact you in case of a query. It will not be used for marketing purposes

**BRIEF DESCRIPTION OF YOUR EXPERIENCE/KNOWLEDGE**

Before confirming your booking we will contact you to ensure you meet the qualification requirements.

- The necessary knowledge and experience
- Two appropriate events to be assessed at

**PAYMENT AUTHORISATION**  
(TO BE COMPLETED BY THE BUDGET HOLDER)

Contact name	Job Title:	Email:
Organisation or Company:		
Address:		
County:	Postcode:	
Country:	Telephone number:	

**NAME AND ADDRESS FOR INVOICE**

If the address is the same as above please tick:

Contact name:	Email:
Organisation or Company:	
Address:	
County:	Postcode:
Country:	Telephone number:

**PURCHASE ORDER REFERENCE**

Please provide the purchase order number (this will be quoted on the invoice):

I confirm that payment for this booking has been fully authorised by someone within a position to do so.	Signature:	Date:
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OPTIONAL UNITS

Candidates must achieve a minimum of 8 credits from optional units (OU) . If you wish to complete more than two optional units you can be registered for them for a small additional fee.

The units in bold are those the EPC/SGSA consider important to achieve this qualification and request they are seriously considered. This is a recommendation but you are free to select the units you consider best for you

Table with 4 columns: Please (with a crossed-out X), OU, Credits, Title. Rows include units like 'Manage the use of physical resources', 'Encourage innovation in own area of responsibility', 'Recruit, select and keep colleagues', etc.

Please read the STANDARDS and ASSESSMENT requirements and complete and return the PRE-REQUISITE LEARNER CRITERIA AGREEMENT

Data Protection Declaration and Privacy statement for Industry Qualifications Ltd.



Data Protection Declaration

In order to be registered on a qualification with Industry Qualifications Ltd IQ we require you to agree to provide your consent for us to process your data. If you do not agree for your data to be processed, you cannot be enrolled on any of IQ's qualifications.

Please read the privacy statement for Industry qualifications over and tick here to confirm that you have read, understood and that you agree to your data being used in order for IQ to meet our statutory responsibilities.

Privacy statement for Industry Qualifications Ltd

Privacy Notice

Industry Qualifications Ltd, (referred to as IQ within this document) is registered with the Information Commissioner's Office (ICO) registration number Z2468559.

How we use your personal information

Your personal information is used by IQ to exercise its functions to meet its statutory responsibilities under the General Conditions of Recognition for Ofqual (England), Qualifications Wales, CCEA (Northern Ireland) and Regulatory Principles of the Scottish Qualifications Authority (SQA), the Department for Education together with the Apprenticeships, Skills Children and Learning Act 2009 to create and maintain a personal record for the purpose of registration, marking, assessment, quality assurance activities together with issuing of results and certificates. Examination results, assessment and quality assurance outcomes will be shared with the centre you are registered with for your qualification.

After completing an IQ qualification your qualification outcome information may be shared with regulators in addition to other awarding organisations in relation to outcomes of assessment and quality assurance to support any request for recognition of prior learning.

If we suspect that any actions or inaction connected to your learning and assessment may be affected by malpractice or criminal activity, we may report this to relevant organisations such as the regulators, the police, or the Serious Fraud Office (SFO).

At no time will your personal information be passed to organisations for marketing or sales purposes. You may be contacted either during or after you complete your IQ qualification by IQ by either mail, email or phone, for quality assurance purposes, monitoring the performance of our approved centres.

Your data will be held securely and confidentially on our management information systems to comply with our statutory responsibilities and will be retained until it is deemed no longer relevant.

What you agree to

By ticking the box overleaf in the data protection declaration and signing this candidate information sheet I agree to IQ processing personal data contained on this form or other data which IQ may obtain from me or other people.

I agree to the processing of such data for any purpose connected with my qualification or for any other legitimate reason. I confirm that the information I have given is true and accurate to the best of my knowledge.

I agree to IQ providing your chosen training provider with details of your exam results, assessment outcomes.

I give my consent to IQ to use my image and signature where necessary to meet regulatory requirements within our statutory responsibilities.

TO BE COMPLETED BY CENTRE - Confirm Candidate Identity

I confirm that the candidate's identification has been checked before they undertake the assessment IQ recommends the following as proof of candidate's identity:

Table with 2 columns: ID (ID 1, ID 2, ID 3) and empty boxes for identification details.

Valid passport (any nationality) Signed UK photocard driving Valid ID/warrant card issued by HM Forces or the Police

Another photographic ID e.g. employee ID card, student ID card, travel card etc.

If a candidate is unable to produce any of the forms of photographic identification listed, as the centre you may accept another form of identification containing a signature e.g. a credit card. State the identification presented above.

CANDIDATE SIGNATURE

Signature:

Date:



**TO BE COMPLETED BY CENTRE – Examination/Assessment Taken** Please list here qualification(s) that you are registering on.

**Qualification Number:** 600/6784/6

**Qualification Name:** IQ Level 4 NVQ Diploma in Spectator Safety Management