**RFQ Appendix 1 Documentation Checklist**

**Section 1 - Organisation Details**

|  |
| --- |
| Name of Organisation: |
| Legal Status:*(e.g. Private Limited Company)* |
| Brief Nature of Business: |
| Industry Sector: |
| Organisation Address: |
| Website: |
| List the results of any inspection by OFSTED in the last 4 years that pertains to delivery: |

**Main Contact**

|  |
| --- |
| Contact Name: |
| Position: |
| Telephone: |
| E-mail: |

**Section 2: Supporting Documents**

***Please note upon successful award of the contract copies of the following documents would be required for verification***

***N/A = Not Available***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Document Required** | **Y** | **N** | **N/A** | **If No or N/A please comment** |
| **Financial and Quality Documents**  |
| Copy of most recent audited accounts |  |  |  |  |
| Copies of insurance policies |  |  |  |  |
| Copies of any external assurance standards, please detail which:*For example: Matrix* |  |  |  |  |
| Confirmation from awarding body for approval to deliver proposed qualification  |  |  |  |  |
| Partner profile |  |  |  |  |
| **Policies and Procedures**  |
|  | **Y** | **N** | **N/A** |  |
| Health and Safety*e.g. Risk assessment for each apprentice’s role; Public Liability Insurance and Employer Liability Insurance including expiry dates* |  |  |  |  |
| Equality and Diversity Policy  |  |  |  |  |
| Disability policy;Safeguarding policy;Prevent policy |  |  |  |  |
| Quality Assurance policy*e.g. Copies of QA policies, including validation documents from awarding bodies and an organisational chart identifying key roles and responsibilities related to the delivery of the programmes* |  |  |  |  |
| Fraud policy and a whistle-blowing policy |  |  |  |  |
| Do you have documented policies and/or procedures relating to the key controls of Apprenticeship or in areas of:1. Eligibility criteria
2. Initial assessment including identification of substantial prior learning
3. Base candidate documentation as required by the funding agreement including ILR, ILP, Apprenticeship Agreement and commitment Statement
4. Tutor and Candidate course reviews
5. Course Evaluation
6. Quality of Teaching & Learning including relevant observation schedules
7. Additional Learning support/needs
8. Achievement Monitoring
9. Absence monitoring
10. Retention of candidate documentation
 |  |  |  |  |
| **Data Protection**  |
| Please provide your Data Protection Registration number: | **Number:**  …………………………………………………. |
| Have you notified the Information Commissioner’s Office that you intend to process personal data for educational purposes under the Data Protection Act? | **Y/N** (delete as appropriate)*Please note that this will be checked against the Registration Number you have provided* |

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| **Section 3: Management Governance** |
| Please provide details of the management, operational and administration staff, involved in the delivery of the Apprenticeship provision. |  |
| Please state which of the following your organisation has (include all that apply):1. A Governing Body or a Board of Directors/Governors/Trustees that includes non-executive (independent) members
2. A Board of Directors made up exclusively of executive Directors
3. An Advisory Group or Board made up exclusively of independent members
4. A Finance Committee that includes independent members
5. An Audit Committee that includes independent members
6. Other
7. None of the above

*Please note that Governing Bodies and Boards of Directors/Governors/ Trustees have statutory duties and responsibilities that differentiate them from Advisory Groups or Boards*Please provide brief details for each of your selections |  |
| Who is responsible for the follow-up and implementation of recommendations made by your auditors? |  |
| Please confirm who is responsible for signing funding agreements or contracts with external organisations and for submitting the monthly returns for the training provisions?Comment:  |  |

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| **Section 4: Staffing and Accreditation**  |
| What is the number and caseload ratio of staff to learners within the following categories?1. Practicing teachers/tutors qualified at level 5 and above
2. Practicing teachers/tutors qualified at level 3 or 4
3. Staff working towards their teaching qualifications
4. Qualified and practising internal verifiers with no teaching duties
5. Qualified and practising assessors with no teaching duties

*Please note that the caseload ratio is the number staff in a category to the total number of learners with whom they work*Comment: |

|  |  |  |
| --- | --- | --- |
| **Cat.** | **No.** | **Ratio** |
| a) |  |  |
| b) |  |  |
| c) |  |  |
| d) |  |  |
| e) |  |  |

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|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please tick as appropriate:I have attached an organisation chartI have attached appropriate teachers’/tutors’, verifiers’ and assessors’ CVsI have provided details below

|  |  |  |
| --- | --- | --- |
| **NAME**  | **JOB TITLE** | **BRIEF DESCRIPTION OF DUTIES** |
|  |  |  |
|  |  |  |

Add pages if required |

**Section 5 – declaration**

* I confirm that to the best of my knowledge all the above information is correct
* I confirm that due care has been taken to verify all the above information and ensure its accuracy
* I understand that the completion of this form does not in any way constitute a contract or agreement to deliver services or goods to or on behalf of the City Corporation
* I consent to information in this form being used for the purposes of the ESFA and other statutory bodies audit and quality performance monitoring visits

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| --- |
| Prepared By: |
| Name: |
| Position: |