Independent Verification Declaration for OPCP-L5

This form is to be completed by the tutor. Please email all documentation to verification@cpcab.co.uk

Please provide the following documentation to support the assessment of this candidate group. Failure to provide ALL this information will delay the Independent Verification and certification of the group. Please use this table as a checklist to ensure that you have provided all the relevant documents for Independent Verification.

Centre name:	Centre number:	
Tutor name and e-mail address:		
CPCAB group number:		
Number of Practice Reviews submitted for Independent Verification:		
Internal Quality Assurance		
Name of Internal Moderator:		
How many Practice Reviews have been Internally Moderated from this group?		
Name of Internal Verifier:		
Has Internal Verification taken place for this cohort?	Yes/No	
Have the Internal Assessment results been uploaded to the CPCAB portal? portal.cpcab.co.uk	Yes/No	
Please ensure you include the following with the candidate portfolios: Please mark		
Sample of candidate Practice Reviews ¹		
Signed candidate Practice Review cover sheets		
Independent Verification Declaration		
All candidate evaluations of the course		
Internal Moderators' report		
Signed (on behalf of the centre):	Position:	
Name (please print):	Date:	

¹ The sample should consist of 30% or four practice reviews, whichever is the greater number. If a group falls below the minimum number of 6 candidates, then <u>all</u> portfolios will need to be emailed to CPCAB for Independent Verification - Please supply a range of abilities.

