

INVESTIGATION REPORT FORM

Form reference M2

Date of report	
Centre Name	
Centre Number	
Full Qualification Title and code	
Unit code (where applicable)	
Learner/s involved (if appropriate)	
Staff involved (if appropriate)	
Area of concern	
Investigation Team (Name, position and signatures*)	
Report Written By	
Reported Reviewed and Signed off By	To be completed by the Head of Centre if the investigation was delegated to another member of staff

*Investigators that sign this report are confirming that any individuals involved have been notified of the issue and been given the opportunity to comment and where appropriate submit a written signed statement.

Contents

1. Purpose of the investigation
2. Background and nature of allegation
3. Key issues
4. Information and evidence including documentation/information reviewed
5. Findings from the investigation and/or review of documentation including compliance/non-compliance with Centre processes and procedures and FutureQuals requirements

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non-compliance with centre processes and procedures and FutureQuals requirements