

MALPRACTICE AND MALADMINISTRATION REPORT FORM

Form reference M1

Before completing this form you should read the FutureQuals Malpractice and Maladministration Policy.

This form may be used to report all suspected or actual cases of malpractice or maladministration on the part of a FutureQuals Approved Centre, Learner, Assessor or other person involved in the design, delivery or award of FutureQuals qualifications. It should include all details of the potential malpractice or maladministration as known at the time but centres should not undertake a full investigation until cleared to do so by FutureQuals.

It is essential that this form is completed as soon as any potential malpractice or maladministration is reported or suspected.

Please complete all sections of the form attaching any supporting documentary evidence and either email, post or fax to:

Head of Quality, FutureQuals, EMP House, Telford Way, Coalville, Leicestershire LE67 3HE

Email: qualityassurance@futurequals.com | Tel: 01530 836662 | Fax: 01530 836668

Please use additional sheets if required.

CENTRE NAME AND ADDRESS:

CENTRE NUMBER:

QUALIFICATION(S) AFFECTED:

NAMES OF LEARNER(S) INVOLVED IF APPROPRIATE:

NAMES AND RESPONSIBILITIES OF CENTRE STAFF INVOLVED IF APPROPRIATE:

NAMES OF FUTUREQUALS STAFF OR CONSULTANTS INVOLVED IF APPROPRIATE:

DATE(S) OF SUSPECTED OR ACTUAL OCCURRENCE:

AREA OF CONCERN (please provide details of the issue raised as potential malpractice or maladministration):

Details of person making the report:

NAME:

POSITION:

SIGNATURE:

DATE:

TELEPHONE:

EMAIL:

Please refer to the FutureQuals Public Interest Disclosure (Whistle-blowing) Policy which can be found on the FutureQuals website if you wish to protect your identity

For office use only:

Received by: _____

Date: _____

Acknowledged by: _____

Date: _____

Malpractice Log Entry by: _____

Date: _____

Decision returned to centre by: _____

Date: _____

Ref Number: _____