

FORM A

APPLICATION FOR REGISTRATION AND ACCREDITATION AS ASSESSOR OR MODERATOR (regulation 3)

Plot 66450, Block 7 Gaborone Botswana Private Bag BO 340 Gaborone

Botswana

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SCHEDULE

Form A

Application for Registration and Accreditation as moderator or assessor (regulation 3)

ASSE	CSSOR		Recent colou passport size photo
MOD	ERATOR		
(Tick a	appropriate box)		
The C	ategory of registration	for this application is	
Provis	ional Registration		
Full Re	egistration		
1.0	PERSONAL INFORM	MATION (Fill in Using Block Letters)	
1.1	Title	MR/MRS/MISS/DR/PROF/OTHER (Specify)	
1.2	Surname		
1.3	First Name(s)		
1.4	Previous Name(s) (If ap	oplicable)	
1.5	Date of Birth(d	//	
1.6	Gender		
1.7	Place of Birth (Country	y)	
1.8	Marital Status		
1.9	Nationality		
1.10	ID No.(Citizens);		
1.10.1	Passport No.(Citizens)	;	
1.11	Postal Address		

		'						
1.12	Phone	Work:	L					
		Home:						
		Cell:						
		Fax:						
1.13	Email Addres	s						
1.14	Present Empl	oyer (<i>If ap</i>	olicabl	(e)				

2.0 EDUCATIONAL BACKGROUND

 ${\bf List\ ALL\ qualifications\ relevant\ to\ assessment/moderation\ service\ you\ are\ currently\ offering\ or\ intend\ to\ offer.}$

Name of Qualification	Name of Institution Awarding	Full address of institution			Full-time or Part-time
	Qualification		From	То	

3.0 WORK EXPERIENCE

List experience in profession, vocation or trade, with your most recent work experience first.

Name of	Address of employer	Dates of en (dd/mm/yyyy)		Position held	Full-time
Employer		From	То		or Part-time

4.0 ASSESSOR/MODERATOR SERVICES

List all assessor/moderator service(s) for which you wish to be registered and accredited.

	Assessor/Moderator Services
1.	
2.	
3.	

5.0 ATTACHMENTS

Please find enclosed in this application pack, the following documents to support my application:

- i. Certified copy of National Identity (Omang) for citizens or passport for non-citizens.
- ii. Certified copies of certificates and transcripts, showing approved course of training and attestation from referees / employer on competencies for services to be provided.
- iii. Evidence of membership of a Professional Association (if applicable).
- iv. Evidence of attainment following assessment against recognised moderator or assessor standards. These could be standards registered on other national qualifications frameworks.
- v. Copy of current CV relevant to the application.

6.0 REFERENCES

Date:

A minimum of two (2) references should be supplied, and the names and addresses of referees must be indicated below:

	First Referee	Second Referee	Third Referee			
Name						
Postal Address						
Town/Village						
Country						
Telephone						
Fax						
Email						
Mobile						
7.0 DECLARATION BY APPLICANT: I declare that I have not in the past five (5) years been convicted in a court of competent jurisdiction, either within or outside Botswana, for a criminal offence that carries a minimum penalty of six months or more imprisonment without the option of a fine and authorize Botswana Qualifications Authority to seek clarification from the relevant authorities. I declare that the above details are correct.						
Name:		Signature:				
Date:						
Witness:						
Name:		Signature:				

10.0 FOR OFFICIAL USE BY BQA

Date application received by Educational Records Management Division	(dd/mm/yyyy)	Signature	
Date ETPs data captured on database	(14/1111/111111111111111111111111111111	Signature	
Date application received by Quality assurance division	(dd/mm/yyyy)	Signature	
	(dd/mm/yyyy)		
Name of BQA officer processing application		,	,
	(surname)	(first name(s)	1)
Date application allocated to Quality assurance officer		Allocated by:	<i>u</i>
	(dd/mm/yyyy)		
Registration and AdBy (Name)	ccreditation number ass	signed:	
• Signature:			
Date of registration:	-		
Date of expiry of regist	ration:		