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| LOGO KEaaa**FORM KNQA/ACC/FABE/ETQA/001D:** |
| **APPLICATION FORM FOR ACCREDITATION OF QUALIFICATION**  |
| Please refer to the KNQA Act no. 22 of 2014 and KNQF regulations, 2018 when completing this form. |
| **Submitting Organisation's information** |
| **ORGANISATION DETAILSFull name(s) and preferred abbreviation of the submitting organisation(s):** |
|  |
| **Address:** |
| **Postcode:** |
| **Telephone Number:** |
| **Website:** |
| **SUBMITTING REPRESENTATIVE DETAILS** |
| **Submitting Representative's Name:**  |
| **Job Title:**  |
| **E-mail:**  |
| **Telephone Number:**  |
| **Date Submitted:**  |
| **ACCOUNTABLE OFFICER DETAILS** |
| **Accountable Officer's Name:** |
| **Job Title:** |
| **E-mail:** |
| **Telephone Number:** |
| **Please provide details of any quality standards, charter marks, professional body affiliations or other regulatory recognition the organisation holds.** |
|  |
| **Please list the external stakeholders your organisation regularly liaises with.** |
|  |
| **PARTNERSHIPS**(Please not this section should only be completed where an awarding body partnership exists) |
| Name of joint awarding partner (s) for the qualification(s)Do you have a partnership agreement? Yes □No □Is this a change to an existing awarding body partnership? Yes □No □ |
| **INTERNAL USE ONLY****SUMMARY OF SUBMISSION****RECOMMENDATIONS****CONDITIONS****ACG DECISION** |

**Please note: Poor quality or accuracy of information submitted may affect the timescales in which a decision can be made.**

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| **REGULATORY PRINCIPLES AND QUALITY ASSURANCE**  |
| **Principle 1. The awarding body shall have clearly defined and effective governance arrangements.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 2. The awarding body shall ensure it has the necessary resources to effectively carry out its operational functions to meet regulatory requirements.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 3. The awarding body shall have clearly defined business planning processes which show evidence of management commitment, decision making and ongoing review.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 4. The awarding body shall continually review the effectiveness of its business services, systems, policies and processes.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 5. The awarding body shall provide clear information on its procedures, products and services and ensure that they are accurate and appropriate to KNQA accredited qualifications.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 6. The awarding body and its providers shall maintain accurate documents, records and data.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 7. The awarding body shall have effective arrangements for communicating with its staff, stakeholders and KNQA Accreditation.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY**  |
| **Principle 8. The awarding body shall ensure that KNQA Accreditation is granted access to all information pertaining to KNQA accredited qualifications.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |
| **Principle 9. The awarding body shall ensure that it has robust systems and processes for the identification, design, development, implementation and review of qualifications, which meet the needs of users.**  |
| Describe how your organisation’s meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. You should also describe how your procedures relate to the specific qualification being presented with this submission. |
| **INTERNAL USE ONLY**  |
| **Principle 10. The awarding body shall ensure that it has the necessary arrangements and resources for the effective delivery; assessment and quality assurance of KNQA accredited qualifications.** |
| Describe how your organisation’s meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. You should also describe how your procedures relate to the specific qualification being presented with this submission. |
| **INTERNAL USE ONLY**  |
| **Principle 11. The awarding body shall ensure that its qualifications and their assessment are inclusive and accessible to learners.**  |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |
| **Principle 12. The awarding body and its providers shall have open and transparent systems to manage complaints.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |

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| **Principle 13.The awarding body and its providers shall have clear, fair and equitable procedures to manage appeals.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |
| **Principle 14. The awarding body and its providers shall ensure that it has safeguards to prevent and manage cases of malpractice and maladministration.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |
| **Principle 15. The awarding body and its providers shall have effective, reliable and secure systems for the registration and certification of learners.** |
| Describe how your organisation meets the above Regulatory Principle and the list of documentation submitted as evidence for this Principle. |
| **INTERNAL USE ONLY** |

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| **QUALIFICATIONS SUBMISSION FOR REGISTRATION** |
| **Title of qualification being submitted (as it will appear on a candidate's certificate).** |
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| **Qualification developed by:** |
|  |
| **Qualification Type** |
|  |
| **Proposed accreditation period**  |
|  |
| **Unit Specifications** |
|  |
| **Additional Requirements** |
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| **Qualification Structure**  |
| **PLEASE COMPLETE THE QUALIFICATION STRUCTURE AND KNQF CREDIT RATING (Accreditation) (attached)** |

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| **KNQF Credit Rating**  |
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| **KNQF Credit Rating Body** |
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| **If the qualification is not KNQF credit rated, is there an intention to do so?** |
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| **Documents Submitted as Evidence:** |
|  |
| **What qualifications does the organisation plan to seek accreditation for in the future and when?** |
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| **INTERNAL USE ONLY** |

Please attach your completed

**Qualification Structure and KNQF Credit Rating (Accreditation)**

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| **Qualification Structure and KNQF Credit Rating**  |
| **Qualification Title** |   |
| **Qualification Developer** |   | **Awarding Body** |   |
| **Date Structure ACG Approved** |   | **Group Award Code** |  |   |
| **Structure Version Number** |   | **Qualification Version**  |  |   |
| **KNQF Overall Level** |   | **Date Accredited From** |  |   |
| **KNQF Overall Credit** |   | **Accreditation End Date** |  |   |
| **Credit Rating Body** |   | **Certification End Date** |   |   |
| **Structure Information (including how many Units are to be selected)** |
| **Accred. Code** | **Developer Code** | **Mandatory/ Optional/ Additional Unit**  | **Unit Title** | **KNQF Level** | **KNQF Credit** | **Date of KNQF Approval**  | **Imported From (Developer Name)** |
|   |   |   |   |   |   |   |   |
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If the space is not enough attach a separate sheet.

**For Internal Use Only**

Scrutiny conducted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List Documents reviewed:

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| --- | --- |
| **Title of Document** | **Principle(s) it relates to** |
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| Date of Submission to KNQA: |  |
| KNQA Decision |  |
| Conditions (please list) |  |
| 1. |
| 2. |
| 3. |
| 4. |

**Please note:** 1.Poor quality or accuracy of information submitted may affect the timescales in which a decision can be made;

2. Foreign or local qualifications belonging to a Qualifications Awarding Body other than the one submitting them should be accompanied by an MOU or any other legal instrument (signed by a lawyer) showing permission for the applying organization to use and register the qualifications in the KNQF;

3. Please provide a full list of all Institutions accredited to offer the qualifications that you have listed.

**Submit All Information to;**

**The Director General**

**Kenya National Qualifications Authority**

**Po Box 72635-00200**

**Nairobi, Kenya**

**Email:** **dg@kna.go.ke**

**Website: www.knqa.go.ke**