

# Centre Application Form 1 A

Please complete in black ink and block capitals



For instructions:

<http://www.psebun.org/> / [info@psebun.org](mailto:info@psebun.org)

## Section 1: Centre Details

### 1.1 Primary Centre Details

Centre Name

Address

Postal code

Telephone

Centre Email

Website

Company  
number

Charity  
Number

UKPRN

### 1.2 Head of Centre

Name

Job Title

Telephone

Email

### 1.3 Centre Contact (if different)

Name

Job Title

Telephone

Email

### 1.4 Quality Assurance Contact (if different)

Name

Telephone

Email

### 1.5 Type of Establishment (see guidance notes)

### 1.6 Partnership Arrangements (see guidance notes)

Details:

### 1.7 Policies & Procedures

(see guidance notes and tick as appropriate)

I have all required policies in place

I have ISO Quality certification (if available not required other policies)

I don't have any of the required policies

I understand I am required to have the specified Policies & Procedures before teaching can take place

### 1.8 Online Examinations (Tick as appropriate)

I have read and understood the requirements for online examinations

I confirm the centre has the minimum required connection, equipment, software and settings to run the online examinations.

**1.9 Centre Staff** (Tick as appropriate)

I have the appropriately trained teaching, invigilation and quality assurance staff for the qualifications I seek approval for.

I understand that that I must maintain accurate CPD records for anyone associated with the Teaching, Invigilation, Internal Verification and Quality Assurance of PSEB qualifications.

I confirm I will allow representatives of the PSEB and the qualification regulators access to staff records as required.

**2.3 Qualification Delivery & Additional Information** (see guidance notes)

Briefly outline how you plan to deliver the qualification(s) you are seeking approval for. Please include information on administration, teaching and assessment arrangements.

[Redacted area for Qualification Delivery & Additional Information]

**Qualification Delivery continued**

[Redacted area for Qualification Delivery continued]

Agreed Total Qualification/ Approval fee  
\$1200

**Section 2 – Qualifications**

**2.1 Current Provision** (see guidance notes)

Which other awarding organisations are working with?

[Redacted area for awarding organisations]

Has your organisation had any sanctions or restrictions imposed in the last 18 months?

[Redacted area for sanctions]

Has your organisation been refused recognition or qualification approval in the last 18 months?

[Redacted area for recognition]

**2.2 Planned Qualification Packs**

**Level**

2.2 Planned Qualification Packs	Level
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]

## 2.4 Industry Sectors

(Tick your training domain as appropriate)

Technology

Health Care

Engineering

Humanities

AYUSH

Management

Life Skills

Academia

## Section 3 – Declaration

By submitting this application, the Head of Centre understands and acknowledges that the centre and staff therein, are bound by the PSEB's terms and conditions as set out in the Centre Agreement, Centre Handbook, Relevant Qualification Specifications and published policies and procedures.

I confirm the information provided in this document is accurate and I understand that providing a false declaration will lead to the instigation of sanctions.

Any implemented compliance activities and imposed sanctions maybe reported to the Qualifications Regulators and other Awarding Organisations.

Signed

Print  
Name

Position

Date

***A-Award | C- Certificate | D- Diploma***