Programme Type	Course Code	Course/Programme Title	Training Provider				
Award Code	Award Type & Level	Award Title	Class Ref. No./Contract Agreement No./ATO Notification N				
F12 Submitted on RCCRS By:			Location				

TRAINING LOCATION								
DECLARATION: I confirm that the assessments have been carried out in line with the Training Standards System, which includes quality assurance processes, and have								
been notified to the Training Standards Office. I confirm that the learners have been informed of their provisional results.								
Signature Print Name Date								
ETB Training Centre Instructor/ Assessor								
Second Provider/Contractor/ATO: Instructor/Trainer/Assessor								
Second Provider/Contractor/ATO: Manager/Coordinator								

ETB Training Centre ASSISTANT MANAGER							
DECLARATION: I confirm that I have viewed these results. Not Applicable (Tick if							
	Signature	Print Name		Date			
ETB Training Centre Assistant Manager							

INTERNAL VERIFIER

DECLARATION: I confirm the assessment events relating to these results were included in the sample frame for internal verification; all of the supporting documentation has been checked for completeness and accuracy and that any issues identified with the assessment process, results and documentation have been recorded. for logging on the TSS Issues Log.

	Signature	Print Name	Date
Internal Verifier of Results			

EXTERNAL AUTHENTICATOR							
DECLARATION: I confirm that these results have been authenticated.							
	Signature	Print Name	Date				
External Authenticator							









RESULTS APPROVAL PANEL								
The results overleaf were discussed at results approval meeting on//								
Any issues arising from discussion: (Tick as appropriate): No Issues Non-Conformance Minority View								
Meeting Decisions:								
DECLARATION: The Chair, on behalf of the Results Approval Panel confirms that these results have been agreed and approved. These results have been subject to the assessment quality assurance processes as specified in the Training Standards System. This includes internal verification of results and external authentication on a sampling basis. The certificate requestor is authorised to order certificates for the learners listed overleaf.								
	Signature		P	rint Name	Date			
Approval of Results								

Programme/Course Start Date (as appropriate)

Programme/Course Finish Date (as appropriate)

Note: All Learners registered on the course must be listed on this form regardless of whether they dropped out or did not meet the standard etc.

Key	P: Pass, S: Successful C: Cre R: Referral, A: Absent, T: Terr ECDL: FC: Full Cert; SC: St	dit, M :N ninated art Cert	/lerit,	D :D	istinc	tion, s Ce	Assessments/Modules t (Overall Module Result)									
No	Learner															
1																
2																
3																
4																
5																
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F12 Course Summary Assessment Sheet and Results Approval Form

	Certification/Award Requirements					
	·					

	Amendment to a Result as Approved by the Results Approval Panel (RAP)									
No	Learner	PPS Number	Assessment/Module Title	Assessment/Module Code			Signature of RAP Chair			
1										
2										
3										
4										
5										

Where an amendment has been approved, the corresponding result on the previous page must have a strike through (bottom left to top right) and a new print-out from RCCRS of the amended result must be attached to this F12.

Learners must be informed in writing of this amendment to their result (prior to updating in RCCRS); this should be copied to the Instructor/Second Provider/Contractor/ATO for information.

Update of the amended result as approved by the Results Approval Panel								
	Signature	Print Name	Date					
Amended result(s) updated in the RCCRS by:								

CERTIFICATES RECEIVED								
Signature Print Name Da								
Certificates & transcripts checked against the F12 by:								