

Youth Achievement Awards - Internal Checklist

SECTION A: To be completed by the Award Group Worker.			
Name of Candidate:		Age:	
Name of Award Group Worker:		Booklet No:	
Name of Participating Unit:		Registration No:	
Name of Operating Agency:		Registration No:	
Award Level <i>(please tick as appropriate)</i> : Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/> Platinum <input type="checkbox"/>			

SECTION B: To be completed by an independent Award Group Worker / Internal Moderator. Check each Challenge against the statements below. Where the answer is YES tick the appropriate box, where NO provide feedback with action points.									
Challenge Sheets	Challenge Number								Action Points/Feedback
	1	2	3	4	5	6	7	8	
The Challenge and level of responsibility has been made clear									
The Challenge took a minimum of 15 hours (with the exception of prescribed Challenges)									
The minimum number of targets have been completed									
The Challenge has been agreed, signed and dated by the Award Group									
The Review grids have been completed									
The date and time taken to complete this challenge has been filled in									
The Award Group Observations are completed and signed									
Portfolio Evidence									
	1	2	3	4	5	6	7	8	
There is enough supporting evidence									
The evidence is linked to the targets that have been set									
The evidence illustrates the appropriate level of responsibility									
Record of Achievement									
The Summary of Challenges is complete									
The Award Group has recommended the Award for internal moderation									
All of the required signatures are in place									

SECTION C: Participating Unit Quality Assurance Declaration <i>(tick one box)</i>		
"I confirm that this portfolio meets required standards and	<input type="checkbox"/>	HAS been sampled as part of the Internal Moderation process"
"I confirm that this portfolio meets required standards but	<input type="checkbox"/>	HAS NOT been sampled as part of the Internal Moderation process"
Participating Unit Moderator's Name:	Signature:	Date:

SECTION D: Operating Agency Quality Assurance Declaration <i>(tick one box)</i>		
"I confirm that this portfolio meets required standards and	<input type="checkbox"/>	HAS been sampled as part of the Internal Moderation process"
"I confirm that this portfolio meets required standards but	<input type="checkbox"/>	HAS NOT been sampled as part of the Internal Moderation process"
Agency Moderator's Name:	Signature:	Date: