

Assessor Registration Application Form

Please complete all relevant information on this form, sign and return to:

Your ICE contact person OR email to support@icexl.co.nz

Completing this form does not mean that you automatically qualify as a registered assessor. Industry Connection for Excellence has sole discretion in approving Assessors.

Both the following options must be ticked before an Assessor Application can be considered.

I hold unit standard 4098 Use standards to assess candidate performance, (please attach evidence)

I hold the qualification or unit standards I intend assessing or I can demonstrate equivalent skills and knowledge

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Is this application a:

New Assessor Application OR E

Extension of Scope Application

Are you applying to be a:

Workplace Assessor

* Can only assess learners within your place of employment

OR

Contract Assessor

- * Can assess learners from outside your place of employment
- * Must have assessor experience

Are you a Limited Liability Company? Yes No

Name of Company (if yes)

A. Applicant Details - please complete in full Title: First name(s): Legal names as in passport or similar document Middle name **Surname:** Legal names as in passport or similar document **Preferred Name:** ICE Registered Assessor Number (if applicable or known): NZQA or National Student Number (NSN) (If known) Date of birth: Street address Postal address (if different from street address) Postcode: Email: **Primary contact number:** Mobile number **Employer:** Work phone (if different from contact number)



Work Address:

^{*} If you are not a Limited Liability Company, complete an IR330C Tax code declaration to include with this application. (Get form here)

B. Criteria for Registration

I have attached evidence to show I hold the qualification / unit standard

OR

I have demonstrated how I meet equivalent skills and knowledge by completing Section G.

I have attached an up-to-date copy of my Curriculum Vitae

Certain industries have specific criteria that assessors need to meet before they can be registered. Please refer to relevant CMR requirements available on NZQA website or to know the criteria send an email to support@icexl.co.nz

I have read the specific Assessor Criteria that relates to the assessment scope I am applying for, and I meet the conditions.

C. Requested Scope of Registration

Assessor scope can only be considered where the employer or organisation you are assessing for, has agreement from ICE to assess the programme.

List the approved qualification/s, or programme/s or unit standards that you are applying for registration to assess. You can talk to your ICE contact if you are unsure.

Approved Programme Title in full OR Unit Standard number and title	Approved (Office use only)

D. Referral Detai	ils	
Please add your	referee's details below:	
Referee name		
Contact details	Phone: #	Email:

E. ICE Assessor Code of Practice

Employer or Company:

I have downloaded, read and understand the Assessor Code of Practice, and agree to adhere to it.

It is available to download from the ICE website here



I confirm the details provided on this form, and in the attached evidence, are true and correct, and I have no conflict of interest that would impact on my ability to carry out my role as an ICE Assessor.

Applicant	Date:	dd/mm/yyyy

G. Table of Evidence for Assessor Registration

This section is only for applicants who do not hold the qualification or unit standards they intend assessing. This is to show how the applicant meets the requirement of "equivalent skills or knowledge".

Please fill in the unit standard(s) you wish to assess. Please enter in the evidence you have that shows you have equivalent skills and knowledge at least 1 level above the unit standard you wish to assess.

Unit Standard #	Unit Standard Title	Level	Credits	Evidence

Moderation and Assessment Advisor

Apprentice Manager Name:

Programme details confirmed

Assessment resources i.e SkillsBank, own, alignment etc.

Evidence of relevant experience provided

IR330C provided if applicable

