

**RECOGNITION OF NON FORMAL LEARNING APPLICATION FORM**

**September 2017**

**RECOGNITION OF NON-FORMAL LEARNING APPLICATION FORM**

These details are required of Non-Formal Education Providers (NFEP) applying for SQA recognition of the non-formal learning activities they deliver.

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| ***A. Non Formal Education Provider Details*** | |
| Name of Non-Formal Education Provider (NFEP) |  |
| Type of NFEP |  |
| Location of provider premises |  |
| Address |  |
| ***B. Contact Details*** | |
| Contact Person |  |
| Designation |  |
| Telephone Number |  |
| Facsimile |  |
| Email Address |  |
| Website |  |
| ***C. Non Formal Learning Activities for which Recognition is sought***  *Attach a completed Recognition of Non-Formal Learning Self Evaluation Form for each Activity or Group of Activities including provision for the delivery and assessing National Competency Standards (NCSs). Please attach payment of a $100 per activity.* | |
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| ***D. Application for the use of the SQA logo***  *Please indicate that your organisation wishes to use the SQA logo for Recognition purposes. Please refer to the policy statement on page 20 of the Guidelines.* |
| I have read and understood the Policy process and procedures as stated in the Guidelines. Yes/No |
| I would like to indicate that\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (NFEP) will be applying in writing to seek approval for the use of the SQA logo.  NFEP Manager Name: Signature: |

**SQA Contact details**

Please send the completed application form, along with all relevant documentation, to:

The Quality Assurance Division Telephone: 685 20976

Samoa Qualifications Authority Facsimile: 685 26314

Box L 851 Email address: [sqa@sqa.gov.ws](mailto:sqa@sqa.gov.ws)

Level 2 Tui Atua TupuaTamasese Efi Building Website: [www.sqa.gov.ws](http://www.sqa.gov.ws)

SOGI