



Validation Form

1. Validation Panel Details

Name	Role	Industry Experience	Qualification/Unit Expertise	Signature

2. Assessment Tools Being Validated

Unit(s) of Competency:

Assessment Tool(s):

- ☐ Knowledge Questions
- ☐ Practical Observation Checklist
- ☐ Project / Case Study
- ☐ Third-Party Report
- ☐ RPL Kit
- ☐ Other: [Specify]

3. Validation Criteria

Tick each criterion as **Compliant (C)**, **Not Compliant (NC)**, or **Not Applicable (N/A)**

Criteria	C	NC	N/A	Comments/ Recommendations
Mapping to unit of competency is accurate and complete	☐	☐	☐	



Criteria	C	NC	N/A	Comments/ Recommendations
Assessment tools address all elements and performance criteria	☐	☐	☐	
Foundation skills and assessment conditions are included	☐	☐	☐	
Evidence requirements are sufficient and appropriate	☐	☐	☐	
Language, Literacy, Numeracy (LLN) is appropriate to AQF level	☐	☐	☐	
Instructions for assessors and students are clear	☐	☐	☐	
Tools allow for consistent judgements by different assessors	☐	☐	☐	
Tools support collection of valid, reliable, sufficient, current, and authentic evidence	☐	☐	☐	
Benchmarks for performance (model answers) are clear and complete	☐	☐	☐	
Feedback mechanisms are in place for students and assessors	☐	☐	☐	

4. Summary of Findings

Strengths Identified:

Improvements Required:

Actions Recommended:



5. Validation Outcome

- ☐ Assessment tools validated – **no changes required**
- ☐ Assessment tools validated – **minor changes required**
- ☐ Assessment tools validated – **major changes required**

Follow-up validation required

☐ Yes

☐ No

Date of follow-up (if applicable): _____

Responsible Person: _____

Section 4 – Mapping & Change Tracking Table

Original Question / Task	Issue Identified During Validation	Change Required / Action Taken	Reason for Change / Improvement Rationale	Validated By	Date

6. Attachments

- ☐ Mapping Document
- ☐ Revised Tools
- ☐ Meeting Notes
- ☐ Evidence Samples
- ☐ Other:

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