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| * Federation TAFE VETDSS Lead Program Teacher and Program Manager are required to use this checklist in December of each year in preparation for delivery of auspice arrangements for each secondary school program. * This should occur at the compulsory industry area meeting following the VETDSS PD Day between Federation TAFE and each participating secondary school. * This checklist must be signed off by the relevant Federation TAFE Program Manager and returned to the Federation College VETDSS Coordinator no later than 21st December of the year prior to commencement. | | |
| Name of Secondary School/College: | |  |
| Secondary School VETDSS Teacher: | |  |
| Date of Meeting: | |  |
| Proposed VETDSS Qualification Name and Code: | |  |
| Name of Federation TAFE VETDSS Lead Program Teacher: | |  |
| **Documentation required for this meeting:**  A copy of the *VETDSS Proposals* for your program provided by the VETDSS Coordinator/Liaison Officer  VETDSS Results Timeline (to be collected and retained by you at this meeting for the following years’ program) | | |
| **Check the following are listed correctly on the VETiS proposal:**  National course code Nominal hours  Unit codes Unit names  VCAA latest update for your program should be checked for any changes or impending changes to units.  [**http://www.vcaa.vic.edu.au/Pages/vet/programs/index.aspx**](http://www.vcaa.vic.edu.au/Pages/vet/programs/index.aspx)  **Check that the teacher has templates of the following:**  FedUni Assessment Tool for units of delivery  Cumulative Assessment Record  VETDSSAttendance Sheets (electronic version)  Check three (3) student files that have been passed on for the this years’ delivery from each completed unit for the following information (choose a different student for each unit):  LLN Assessment Test & letter from FedCollege  Federation TAFE VET Induction Checklist  Federation TAFE Pre-Training Review  Evidence students have received FedUni Handbook ie emailed the link or given a hard copy  Unit Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Unit Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Unit Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Please ensure you check the following on the assessment tool documentation for each of the above student files:  Start and end dates correspond with *VETDSS results timeline*  Unit descriptor and pre-requisite requirements are correct  Federation TAFE assessment tasks correspond with Cumulative Assessor Report  Observation instructions and expected responses are documented  Verbal questioning and expected responses are documented  Assessment coversheet with student’s signature and FedUni ID number is completed for each  assessment tool and unit record of assessment outcome from that unit  Student feedback for each assessment has been signed and Campus Solutions ID on form  Federation University assessment grading is being used on Cumulative Assessor report– S, NS for the  assessment task and either CY,CN,WP,WD for the final results | | |
| **Comments:** | | |
| **FedUni TAFE VETDSS Lead Program Teacher:**  **Name:**  **Signature:**  **Date:** | **Checked by Federation TAFE Program Manager:**  **Name:**  **Signature:**  **Date:** | |