

City & Guilds KS5 Technical Qualifications

Employer Involvement Planner and Tracker 2020

This planner can be used to capture how your centre intends to meet the employer involvement requirements for a Technical Qualification. This is to be uploaded to the Moderation Portal, along with a representative sample of evidence of the below activities having taken place, by **Friday 11 June 2021**.

All centres who are new to delivery of Technical Qualifications must submit this Employer Involvement planner for review to employerinvolvement@cityandguilds.com by **31 January 2021**. This is a support measure, for us to ensure at an early stage that new centres have included meaningful Employer Involvement activities in their delivery of Technical Qualifications. More information around what are meaningful activities can be found within the [Employer Involvement centre guidance](#) on our website.

We recommend that centres use this document on an ongoing basis throughout the year to track and record evidence of Employer Involvement activities. One planner should be uploaded to the Moderation Portal for **each qualification** that is being delivered.

You may detail up to six activities on this document, but if you wish to provide information around any further Employer Involvement activities, please provide an additional attachment.

Centre details

Centre Number (6 numerals plus any suffix)		Full Centre Name:	
Qualification number:		Academic Year:	2020 - 2021

Employer Involvement activity 1:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Employer Involvement activity 2:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Employer Involvement activity 3:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Employer Involvement activity 4:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Employer Involvement activity 5:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Employer Involvement activity 6:

What is the type of planned Employer Involvement activity?		Date of the planned activity:	
Employer Name:		Will this be a remote or a face-to-face activity?	Remote / Face to face
Further details of the Employer Involvement activity:			
How will you provide evidence to show that this activity took place?			
Did the Employer Involvement activity take place as planned?	Yes / No	Date of the activity:	
If the planned Employer Involvement activity did not take place, please detail the contingency / replacement:			

Declaration

To be completed by the Centre Contact (the key contact for Employer Involvement at the centre) **at submission stage to the Moderation Portal only:**

By ticking this box I / we confirm that the information in this form is accurate and that I / we have the necessary consents to provide any personal information set out in this form to The City and Guilds of London Institute to use for the purpose of quality assuring the employer involvement requirements for the Technical Qualifications

Name:	
Job title:	
Email address:	
Telephone no:	
Date:	