Level 1/2/3
ITQ Award/Certificate/Diploma
for IT Users – new units
Level 1  (7574-01, 02, 03 -90)

Unit recording forms with centre and candidate details forms
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Recording forms for ITQ candidate portfolios

City & Guilds has developed these recording forms, for new and existing centres to use as appropriate. Although it is expected that new centres will use these forms, centres may devise or customise alternative forms, which must be approved by the external verifier before they are used by ITQ candidates and assessors at the centre. These are divided between two document types, those for the specific Level and Units being undertaken and the Generic Recording Forms document that has forms that can be used at all levels;

- TS-01-7574 – Level 1 Centre information, Candidate information and Unit Recording forms
- TS-02-7574 – Level 2 Centre information, Candidate information and Unit Recording forms
- TS-03-7574 – Level 3 Centre information, Candidate information and Unit Recording forms
- TS-99-7574 – Generic Recording Forms

Where a centre wishes to use other electronic methods of keeping evidence they will need to discuss this with their external verifier.

This document contains the generic forms with blank versions of the Unit recording forms where these may be more suitable to the assessment and training being carried out.

Forms 5, 6, 7, 8, 10, 11 and 12, or approved alternatives, are a requirement. The other forms have been designed to help the assessment and recording process.

Candidate and centre details (Form ITQ01)
Form used to record candidate and centre details. This should be the first page of the candidate portfolio.

Contact details and signatures (Form ITQ02)
Form used to record details and signatures of assessor(s) and internal verifier(s).

Candidate résumé (Form ITQ03)
Form used if the candidate does not have an appropriate Curriculum Vitae (CV) for inclusion in the portfolio.

Skill scan (Form ITQ04)
Form used to record the candidate’s existing skills and knowledge.

Expert/witness status list (Form ITQ05)
Form used to record the details of all those who have witnessed candidate evidence.

Assessment plan, review and feedback form (Form ITQ06)
Form used to record unit assessment plans, reviews and feedback to the candidate. The form allows for a dated, ongoing record to be developed.

Performance evidence record (Form ITQ07)
Form used to record details of activities observed, witnessed or for which a reflective account has been produced.

Questioning record (Form ITQ08)
Form used to record the focus of, and responses to, assessor devised questions. (Where question banks or online testing is used, the location of this evidence should be recorded on Form ITQ10.).

Professional discussion record (Form ITQ09)
Form used to record the scope and outcome of professional discussion if it is used.
Evidence location and summary sheet (Form ITQ10)
Form used to identify what requirements each piece of evidence covers and where it is located, including questioning records which are held elsewhere (for example, because they were conducted online).

Assessment and verification declaration (Form ITQ11)
Form used as attestation that the evidence contained in the portfolio is authentic and is the work of the candidate undertaken in accordance with the requirements of the ITQ.

Summary of achievement (Form ITQ12)
Form used to record the candidate’s on-going completion of units and progress to final achievement of the complete ITQ.

Please photocopy or print the forms as required.

MS Word amendable versions of these forms are also available on the City & Guilds website.
Form ITQ01 Candidate and centre details
Certificate for IT Users (ITQ)

City & Guilds number:  

Candidate name:  
Candidate contact details:  

City & Guilds candidate enrolment number:  

Date enrolled with centre:  
Date registered with City & Guilds  

Centre number:  
Centre Name:  
Workplace name (if appropriate):  

Centre address:  
Workplace address (if appropriate):  

Centre telephone number:  
Email:  
Centre contact/quality assurance co-ordinator (QAC) name:  
Centre contact/quality assurance co-ordinator (QAC) contact details:  
Centre contact/quality assurance co-ordinator (QAC) email address:  
Form ITQ02 Contact details and signatures
Certificate for IT Users (ITQ)  Level: _______

Candidate name: __________________________ Signature: __________________________

Internal verifier name: ______________________________________________________
Signature: _________________________________________________________________
Position: _________________________________________________________________
Contact details: (Tel/email) __________________________________________________

Workplace manager name: ___________________________________________________
Signature: _________________________________________________________________
Position: _________________________________________________________________
Contact details: (Tel/email) __________________________________________________

Assessor name (1): _________________________________________________________________________
Signature: _________________________________________________________________________________
Position: _________________________________________________________________________________
Contact details: (Tel/email) _____________________________________________________________________
work-based / peripatetic / independent* (*delete as necessary)

Assessor name (2): _________________________________________________________________________
Signature: _________________________________________________________________________________
Position: _________________________________________________________________________________
Contact details: (Tel/email) _____________________________________________________________________
work-based / peripatetic / independent* (*delete as necessary)

Assessor name (3): _________________________________________________________________________
Signature: _________________________________________________________________________________
Position: _________________________________________________________________________________
Contact details: (Tel/email) _____________________________________________________________________
work-based / peripatetic / independent* (*delete as necessary)

(photocopy as required)
Form ITQ03 Candidate résumé

Name: ____________________________  Date of Birth: ___ / ___ / ___

Address: ____________________________________________________________
__________________________________________________________
__________________________________________________________

Post Code: __________  Telephone number: __________________________

Education:
(University, college and school name attended, towns and dates)

Qualifications gained: Date:

Current work role/responsibilities:

Employment history and/or voluntary work: Date:

Courses attended in the last 5 years: Date:

Interests
Form ITQ04 Skill scan
Certificate for IT Users (ITQ)

Candidate name: ________________________________

<table>
<thead>
<tr>
<th>Unit ref</th>
<th>Do you currently do this? Provide examples (if possible)</th>
<th>Have you evidence of doing this in the past? Provide examples (if possible)</th>
</tr>
</thead>
</table>

Relevant qualifications held

Further training/experience needed

Attach additional sheets as required
Candidate name: 

Please ensure that all witnesses who have signed the candidate’s evidence or written a report are included on this witness status list. All necessary details must be included and signed by the witness as being correct.

<table>
<thead>
<tr>
<th>Name and contact address of witness</th>
<th>Witness status</th>
<th>Professional relationship to candidate</th>
<th>Unit or elements witnessed</th>
<th>Witness signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

**Witness status categories**

1. Occupational expert meeting specific qualification requirement for role of Expert Witness
2. Occupational expert not familiar with the standards
3. Non expert familiar with the standards
4. Non expert not familiar with the standards

Assessor name: ________________________________  
Signature: ____________________________________

(photocopy as required)
Form ITQ06 Assessment plan, review and feedback

Certificate for IT Users (ITQ) Level: ________

Candidate name: ________________________________

Assessor name: ________________________________

Unit number(s):  Unit Title(s)

________  ________________________________

________  ________________________________

________  ________________________________

________  ________________________________

This record can be used for single and multiple unit planning

<table>
<thead>
<tr>
<th>Date</th>
<th>Assessment planning, review, feedback and judgement record</th>
<th>Candidate and assessor signatures</th>
<th>Evidence reference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Assessment plan, review and feedback (continued)

<table>
<thead>
<tr>
<th>Date</th>
<th>Assessment planning, review, feedback and judgement record</th>
<th>Candidate and assessor signatures</th>
<th>Evidence reference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above is an accurate record of the discussion

**Candidate signature:**

**Assessor signature:**

**Date:**

**Date:**

*photocopy as required*
# Form ITQ07 Performance evidence record

**Candidate name:**

<table>
<thead>
<tr>
<th>ITQ Unit:</th>
<th>Using a computer keyboard</th>
<th>Unit No.:</th>
<th>7574-134</th>
</tr>
</thead>
</table>

Use this form to record details of activities (tick as appropriate):

- [ ] observed by your assessor
- [ ] seen by witness
- [ ] seen by expert witness
- [ ] self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>7574-134.1</td>
<td>Use a keyboard to enter and edit alphanumeric information accurately</td>
<td>7574-134.1.1 Input information accurately using alphanumeric, punctuation and special character keys as required</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-134.1.2</td>
<td>Use shift, Ctrl, Alt, num and caps lock, spacebar, tab and editing keys as appropriate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-134.1.3</td>
<td>Check the accuracy of information, using the keyboard to edit and make corrections as required</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-134.2</td>
<td>Use a keyboard to access and navigate software applications</td>
<td>7574-134.2.1 Use keyboard controls to access, open and close software applications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-134.2.2</td>
<td>Use navigation keys to move around software applications</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-134.2.3</td>
<td>Identify how function keys and keyboard short-cuts can be used within a selected software application to improve efficiency</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

**Candidate signature:**

**Assessor/Expert witness signature:**

*delete as appropriate

---

ITQ (7574) Level 1 Recording Forms
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Form ITQ08 Questioning record

Candidate name: ________________________________

**ITQ Unit:** Using a computer keyboard

**Unit No.:** 7574-134

<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor's questioning record</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
</tr>
</tbody>
</table>

The above is an accurate record of the questioning.

**Assessor/Expert witness signature:** ________________________________

*delete as appropriate

**Internal Verifier signature (if sampled):** ________________________________

**Date:** ________________________________

*(photocopy as required)*
Form ITQ07 Performance evidence record

Candidate name:

**ITQ Unit:** Internet safety for IT Users  
**Unit No.:** 7574-135

Use this form to record details of activities (tick as appropriate):

- [ ] observed by your assessor  
- [ ] seen by witness  
- [ ] seen by expert witness  
- [ ] self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
</table>
| 7574-135.1 | Understand the risks that can exist when using the Internet | 7574-135.1.1 Identify risks to user safety and privacy  
7574-135.1.2 Identify risks to data security  
7574-135.1.3 Identify risks to system performance and integrity  
7574-135.1.4 Outline how to minimise Internet risks  
7574-135.1.5 Outline factors that affect the reliability of information on websites | | | |
| 7574-135.2 | Know how to safeguard self and others when working online | 7574-135.2.1 Take appropriate precautions to maintain data security  
7574-135.2.2 Protect personal information online  
7574-135.2.3 Describe the forms and features of cyberbullying  
7574-135.2.4 Identify when and how to report online safety issues  
7574-135.2.5 Identify where to get online help and information on e-safety | | | |
| 7574-135.3 | Take precautions to maintain data security | 7574-135.3.1 Take appropriate precautions to maintain data security | | |
| 7574-135.3.2 | Take appropriate precautions to maintain system performance and integrity |
| 7574-135.3.3 | Use appropriate browser safety and security settings |
| 7574-135.3.4 | Use appropriate client software safety and security settings |

| 7574-135.4 | Follow legal constraints, guidelines and procedures which apply when working online |
| 7574-135.4.1 | Identify legal constraints on the uploading and downloading of software and other digital content |
| 7574-135.4.2 | Identify legal constraints on online behaviour |
| 7574-135.4.3 | Correctly observe guidelines and procedures for the safe use of the Internet |

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

Candidate signature: ________________________________ Date: ________________

Assessor/Expert witness signature: ________________________________ Date: ________________

*delete as appropriate

Internal Verifier signature (if sampled): ________________________________ Date: ________________

(photocopy as required)
Form ITQ08 Questioning record

Candidate name:

ITQ Unit:  Internet safety for IT Users  Unit No.:  7574-135

<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor's questioning record</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
<td>Answers</td>
</tr>
</tbody>
</table>

The above is an accurate record of the questioning.

Assessor/Expert witness signature: ___________________________ Date: ___________________________

*delete as appropriate

Internal Verifier signature (if sampled): ___________________________ Date: ___________________________

(photocopy as required)
Form ITQ07 Performance evidence record

Candidate name:

**ITQ Unit:** Understanding the potential of IT  
**Unit No.:** 7574-234

Use this form to record details of activities (tick as appropriate):
- [ ] observed by your assessor  
- [ ] seen by witness
- [ ] seen by expert witness  
- [ ] self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
</table>
| 7574-234.1  
Understand the impact of IT on business | 7574-234.1.1  
Describe the potential of IT to improve internal and external communication | | | |
| | 7574-234.1.2  
Describe the potential of IT to improve business process | | | |
| | 7574-234.1.3  
Describe the possible positive and negative impact on employees of the deployment of IT | | | |
| 7574-234.2  
Understand the impact of the internet and mobile communications on society and the individuals | 7574-234.2.1  
Describe the benefits of new technologies on personal and social communication and interaction | | | |
| | 7574-234.2.2  
Describe how IT can improve access to education and government services | | | |
| | 7574-234.2.3  
Describe how IT can improve access to products and services | | | |
| | 7574-234.2.4  
Identify possible drawbacks of new technologies for individuals and society | | | |
| 7574-234.3  
Know how IT is used in an organisation | 7574-234.3.1  
Describe the purpose of key components of the IT system (hardware, software and communications) | | | |
| | 7574-234.3.2  
Describe the roles and responsibilities of those involved in operating and | | | |
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7574-234.3.3</td>
<td>Describe the guidelines and procedures for accessing IT help and support</td>
</tr>
<tr>
<td>7574-234.4.1</td>
<td>Compare different approaches to introducing new IT tools and systems</td>
</tr>
<tr>
<td>7574-234.4.2</td>
<td>Describe potential benefits from the introduction of new IT tools and systems</td>
</tr>
<tr>
<td>7574-234.4.3</td>
<td>Describe the methods used by manufacturers and publishers to control usage of digital content and devices</td>
</tr>
<tr>
<td>7574-234.5.1</td>
<td>Describe the main risks to security for IT users</td>
</tr>
<tr>
<td>7574-234.5.2</td>
<td>Describe the types of control measures and policies organisations can put in place to maximise personal and data protection</td>
</tr>
<tr>
<td>7574-234.5.3</td>
<td>Describe how organisations can exploit new developments in technology to improve cyber security</td>
</tr>
</tbody>
</table>

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

**Candidate signature:** ___________________________  **Date:** __________

**Assessor/Expert witness signature:** ___________________________  **Date:** __________

*delete as appropriate*

**Internal Verifier signature (if sampled):** ___________________________  **Date:** __________

(photocopy as required)
<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor’s questioning record</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
</tr>
</tbody>
</table>

The above is an accurate record of the questioning.

Assessor/Expert

Witness signature: ___________________________  Date: ________________

*delete as appropriate

Internal Verifier

Signature (if sampled): ___________________________  Date: ________________

(photocopy as required)
Form ITQ07 Performance evidence record

Candidate name: 

**ITQ Unit:** Describe personal and team effectiveness using IT  
**Unit No.:** 7574-235

Use this form to record details of activities (tick as appropriate):
- observed by your assessor
- seen by witness
- seen by expert witness
- self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
</table>
| 7574-235.1  
Know how IT can support personal development | 7574-235.1.1  
Describe how IT tools and systems can be used to manage time effectively  
7574-235.1.2  
Identify IT tools and resources to support own learning and development  
7574-235.1.3  
Describe how IT tools can support personal performance information |  |  |  |
| 7574-235.2  
Use IT to support personal development | 7574-235.2.1  
Create an action plan to improve own working practice  
7574-235.2.2  
Participate in activities to meet personal development goals  
7574-235.2.3  
Use appropriate IT tools to support personal performance improvement |  |  |  |
| 7574-235.3  
Know how IT can support the development of team effectiveness | 7574-235.3.1  
Describe the roles and responsibilities of team members  
7574-235.3.2  
Describe how IT tools and systems can be used to improve team activities  
7574-235.3.3  
Identify ways that IT can be used to overcome obstacles to effective teamwork |  |  |  |
<table>
<thead>
<tr>
<th>7574-235.4</th>
<th>7574-235.4.1</th>
<th>7574-235.4.2</th>
<th>7574-235.4.3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review use of IT for team or collaborative activities</td>
<td>Review own contribution to team activities using IT</td>
<td>Provide feedback to others on their use of IT in a constructive and considerate manner</td>
<td>Review feedback from others on own use of IT</td>
</tr>
</tbody>
</table>

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

Candidate signature: ___________________________ Date: ___________

Assessor/Expert witness signature: ___________________________ Date: ___________

*delete as appropriate

Internal Verifier signature (if sampled): ___________________________ Date: ___________

(photocopy as required)
<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor's questioning record</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
<td>Answers</td>
</tr>
</tbody>
</table>

The above is an accurate record of the questioning.

**Assessor/Expert**

*delete as appropriate*

**Internal Verifier**

*signature (if sampled):*

**Date:**

(Date)

(photocopy as required)
Form ITQ07 Performance evidence record

Candidate name:

**ITQ Unit:** Understanding the potential of IT  
**Unit No.:** 7574-334

Use this form to record details of activities (tick as appropriate):
- [ ] observed by your assessor
- [ ] seen by witness
- [ ] seen by expert witness
- [ ] self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>7574-334.1</td>
<td>Understand how IT is transforming business and industry</td>
<td>7574-334.1.1 Explain the potential of IT to transform data management and business processes</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>7574-334.1.2 Explain how environmental issues can affect the use of IT in business and industry</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>7574-334.1.3 Evaluate how social and collaborative technologies are transforming business and industry</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-334.2</td>
<td>Understand the impact of the internet and mobile communications on society and the individual</td>
<td>7574-334.2.1 Explain how technology is transforming personal and social communication and interaction</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>7574-334.2.2 Describe the main barriers to take-up or adoption of digital technologies by individuals and groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>7574-334.2.3 Describe measures to increase accessibility to digital information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7574-334.3</td>
<td>Understand how IT is used in an organisation</td>
<td>7574-334.3.1 Describe the movement and transfer of information in key technology-enabled business processes using appropriate IT tools to illustrate the information flow</td>
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<td>7574-334.3.2 Explain the principles of interaction between key components of the IT system (hardware, software and communications)</td>
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<tr>
<td>Topic</td>
<td>Description</td>
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<tr>
<td><strong>7574-334.3.3</strong></td>
<td>Review how the use of bespoke software and/or specialist systems contribute to organisational success</td>
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<tr>
<td><strong>7574-334.4</strong></td>
<td>Understand the effect of introducing new IT tools and systems in an organisation</td>
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<tr>
<td><strong>7574-334.4.1</strong></td>
<td>Evaluate key factors influencing the successful introduction of new IT tools and systems</td>
<td></td>
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<tr>
<td><strong>7574-334.4.2</strong></td>
<td>Recommend a development in IT tools or systems for IT users highlighting the benefits, risks, opportunities and costs</td>
<td></td>
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<tr>
<td><strong>7574-334.5</strong></td>
<td>Understand the methods used to enhance IT security in an organisation</td>
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<tr>
<td><strong>7574-334.5.1</strong></td>
<td>Evaluate the main risks to IT security</td>
<td></td>
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<tr>
<td><strong>7574-334.5.2</strong></td>
<td>Evaluate the control measures in place to maximise personal and data protection</td>
<td></td>
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<tr>
<td><strong>7574-334.5.3</strong></td>
<td>Explain how organisations are using innovative systems and software to improve cyber security</td>
<td></td>
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</tr>
</tbody>
</table>

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

Candidate signature: ____________________________ Date: __________

Assessor/Expert witness signature: ____________________________ Date: __________

*delete as appropriate

Internal Verifier signature (if sampled): ____________________________ Date: __________

(photocopy as required)
Form ITQ08 Questioning record

Candidate name: __________________________

**ITQ Unit:** Understanding the potential of IT

**Unit No.:** 7574-334

<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor's questioning record</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
</tr>
<tr>
<td></td>
<td>Answers</td>
</tr>
</tbody>
</table>

The above is an accurate record of the questioning.

**Assessor/Expert witness signature:** ____________________________

*delete as appropriate*

**Date:** _________________

**Internal Verifier signature (if sampled):** ____________________________

**Date:** _________________

(photocopy as required)
Form ITQ07 Performance evidence record

Candidate name: __________________________

**ITQ Unit:** Developing personal and team effectiveness using IT  **Unit No.:** 7574-335

Use this form to record details of activities (tick as appropriate):

- [] observed by your assessor
- [] seen by witness
- [] seen by expert witness
- [] self reflective account

NB Your assessor may wish to ask you some questions relating to this activity. There is a separate sheet for recording these. The person who observed/witnessed your activity must sign and date overleaf.

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Assessment criteria</th>
<th>Performance evidence</th>
<th>Date(s) Achieved</th>
<th>Assessor signature</th>
</tr>
</thead>
</table>
| 7574-335.1
Understand how IT can support personal development | 7574-335.1.1 Describe how IT tools and resources can support to own learning and development | | | |
| | 7574-335.1.2 Explain how IT tools and systems can be used to support personal performance improvement | | | |
| 7574-335.2
Use IT to support personal development | 7574-335.2.1 Implement IT tools and systems to support personal performance improvement and time management | | | |
| | 7574-335.2.2 Develop and implement an action plan to use IT to improve own working practice | | | |
| 7574-335.3
Understand how IT can support the development of team effectiveness | 7574-335.3.1 Describe the roles and responsibilities of team members | | | |
| | 7574-335.3.2 Explain how IT tools and systems can be used to enhance effective team communications and collaboration | | | |
| | 7574-335.3.3 Compare ways that IT can be used to overcome obstacles to effective teamwork | | | |
| 7574-335.4
Work as a member of a team to achieve defined goals and implement | 7574-335.4.1 Assess contribution of own use of IT to team activities | | | |
<table>
<thead>
<tr>
<th>agreed plans</th>
<th>7574-335.4.2 Provide feedback to others on their use of IT in a constructive and considerate manner</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7574-335.4.3 Review feedback from others on own performance and adapt behaviour where appropriate</td>
</tr>
<tr>
<td></td>
<td>7574-335.4.4 Assist others to use new IT tools and systems</td>
</tr>
</tbody>
</table>

I confirm that the evidence listed is my own work and was carried out under the conditions and context specified in the standards.

---

**Candidate signature:**

__________________________________________________________

**Date:**

__________

**Assessor/Expert witness signature:**

__________________________________________________________

**Date:**

__________

*delete as appropriate

**Internal Verifier signature (if sampled):**

__________________________________________________________

**Date:**

__________

(photocopy as required)
Form ITQ08 Questioning record

Candidate name: ________________________________

**ITQ Unit:** Developing personal and team effectiveness using IT  **Unit No.:** 7574-335

<table>
<thead>
<tr>
<th>Links to: Assessment Criteria</th>
<th>Assessor's questioning record</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Questions</td>
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</table>

The above is an accurate record of the questioning.

Assessor/Expert witness signature: ________________________________  Date: _________________

*delete as appropriate

Internal Verifier signature (if sampled): ________________________________  Date: _________________

(photocopy as required)
Form ITQ09 Professional discussion record

Candidate name: 

Assessor/Expert witness name: 

<table>
<thead>
<tr>
<th>Areas to be covered within the discussion</th>
<th>Unit / element reference</th>
<th>Unit/s knowledge reference</th>
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<tbody>
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</table>

Outline record of discussion content (continues overleaf, use additional sheets as required)

Counter ref (if recording used)
<table>
<thead>
<tr>
<th>Outline record of discussion content (use additional sheets as required)</th>
<th>Counter ref (if recording used)</th>
</tr>
</thead>
</table>

**Start time:**  
**Finish time:**

The above is an accurate record of the discussion.

**Candidate signature:** ________________________________ **Date:** ________________

**Assessor/Expert witness signature:** ________________________________ **Date:** ________________

*delete as appropriate

**Internal Verifier signature (if sampled):** ________________________________ **Date:** ________________

(photocopy as required)
## Form ITQ10 Evidence location and summary sheet

**Certificate for IT Users (ITQ)**

City & Guilds number:  
Level:  
Candidate name: 
City & Guilds enrolment number:  

<table>
<thead>
<tr>
<th>Unit No(s.)</th>
<th>Item of evidence</th>
<th>Loc.</th>
<th>Ref</th>
<th>Link to Outcome (✓)</th>
<th>Link to Assessment criteria (✓)</th>
</tr>
</thead>
<tbody>
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</table>

Location key:  
- p = portfolio,  
- o = office  
(add further categories as appropriate)  
(photocopy as required)
Form ITQ11 Assessment and verification declaration

Certificate for IT Users (ITQ)

City & Guilds number:  
Level  

Candidate declaration:

Candidate name:  

City & Guilds enrolment number:  

I confirm that the evidence listed for the units undertaken is authentic and a true representation of my own work.

Candidate signature:  
Date:  

Assessor declaration:

I confirm that this candidate has achieved all the requirements of this unit with the evidence listed. (Where there is more than one assessor, the co-ordinating assessor for the unit should sign this declaration.)

Assessment was conducted under the specified conditions and context, and is valid, authentic, reliable, current and sufficient.

Assessor name:  

Assessor signature:  
Date:  

Counter signature (if relevant):  
Date:  

Internal verifier Declaration:  

This section to be left blank if sampling of this candidate’s work did not take place.

I have internally verified the assessment work on this unit in the following ways (please tick):

☐ sampling candidate and assessment evidence    ☐ observation of assessment practice

☐ discussion with candidate    ☐ other – please state:  

I confirm that the candidate’s sampled work meets the standards specified and may be presented for external verification and/or certification.

Internal verifier name:  

Internal verifier signature:  
Date:  

Counter signature (if relevant):  
Date:  

(photocopy as required)
Form ITQ12 Summary of achievement

Certificate for IT Users (ITQ)  

<table>
<thead>
<tr>
<th>Unit</th>
<th>Title</th>
<th>Date internally verified</th>
<th>Most used types of evidence (use key below)</th>
<th>Assessor signature (if there is a second line assessor – both must sign)</th>
<th>Candidate signature</th>
<th>IV signature (If there is a second line IV – both must sign)</th>
<th>EV signature (If sampled)</th>
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Compence has been demonstrated in all of the units/award recorded above using the required assessment procedures and the specified conditions/contexts. The evidence meets the requirements for validity, authenticity, currency, reliability and sufficiency.

Internal verifier signature: ___________________________ Date: ______________

Key for most used evidence type:
1. observation 2. expert witness testimony 3. witness testimony 4. work products 5. questioning 6. professional discussion 7. simulation 8. accreditation of prior experience/learning 9. assignments, projects/case studies (photocopy as required)