

**Compliant Regarding**

**Loss or Destroyed Documents from the Learner**

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| Complaints Procedure see NISQ 22 Stage 1 Applies |
| NISQ Approved Centre Details | Name –NISQ Registration Number –Address –Governing Body or their RepresentativeName –Position within NISQ Approved Centre – | Supplied Yes/No |
| Learner Details | Name –Unique Learner identification Number –Address – |  |
| NISQ Regulated Qualification Details | Title of NISQ Regulated Qualification Registered For – NISQ Regulated Qualification Identification Number – Modules Completed – TitlesUnits Completed – TitlesAssessments Completed – Learning Outcomes Completed – |  |
| Explanation for Report | Details of the Lost or Destroyed Documents referring to the Named Learner- an explanation; |  |
| Lost or Destroyed Documentation | List Documentation lost or Destroyed1.
2.
3.
 |  |
| Compliant  | Learner outlines Compliant -  |  |
| Declaration | I hereby in writing confirm the information I have submitted is true and factually correct.Signature –Name –Date - |  |
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