Annex S

Preparations for PSRB engagement

# Details of engagement:

|  |  |
| --- | --- |
| **School** |  |
| **Division** |  |
| **PSRB** |  |
| **Type of engagement**  ***e.g. accreditation visit, paper-based recognition exercise, mid-cycle follow-up visit*** |  |
| **Date of engagement** |  |

# Administration:

|  |  |  |
| --- | --- | --- |
| **School/Divisional Contact Name and Details** |  | |
| **Responsible QACO Representative** |  | |
| **Approximate timeline for engagement**  ***e.g. deadline for submission of paperwork, date of visit, informal feedback, formal report, response*** | **Date** | **Event** |
|  |  |
|  |  |
|  |  |
|  |  |
| **Date of Planning Meeting (if relevant)** |  | |
| **Criteria set by PSRB for engagement** | Please either:  (i) list below, (ii) append document to this form or  (iii) provide a web link: | |
| **Report and date of previous engagement (if appropriate)** |  | |
| **Have any recommendations from previous report/ engagement not been implemented?**  **If not, please explain why not** |  | |
| **Are there any PSRB criteria which concern the School or are likely to prove problematic?** |  | |
| **Are there areas where the School will require additional support for its engagement?** |  | |

# Action Plan:

Please outline below any actions which need to be taken in preparation for the PSRB engagement.

|  |  |  |
| --- | --- | --- |
| **Action** | **Responsible** | **Deadline** |
|  |  |  |
|  |  |  |
|  |  |  |

# Other Information:

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Note: Once this form has been completed it should be sent to the relevant School/Divisional representative for consideration. A copy is to be retained in the Quality Assurance and Compliance Office.