## **NZQA logo**

## **Involvement in Qualification Review Stakeholder attestation (NZQF7)**

Each key stakeholder involved in the qualification review is required to attest to their involvement for the outcome of the review.

|  |  |
| --- | --- |
| **Name of organisation** |  |
| **Contact name** |  |
| **Contact position** |  |
| **Contact email/phone number** |  |
| **Party(ies) represented** |  |

**Reviewed qualifications**

|  |  |  |  |
| --- | --- | --- | --- |
| **[Ref:]** | **Qualification title** | **Level** | **Credits** |
| Level3 | New Zealand Certificate in Culinary Foundation Skills (Level 3) with an optional strand in culinary proficiency | 3 | 40-60 |
| Level4 | New Zealand Certificate in Culinary Practice (Level 4) | 4 | 80 |
| Level5 | New Zealand Certificate in Culinary Practice (Level 5) | 5 | 120 |
| Level6 | New Zealand Diploma in Culinary Practice (Level 6) | 6 | 120 |
| Level7 | New Zealand Diploma in Culinary Practice (Level 7) | 7 | 120 |

I confirm that I and/or the party(ies) I represent have been involved in the qualification review and that:

|  |  |
| --- | --- |
| I confirm support for the qualification content. | Yes/No |
| I have provided direct input into the development of the qualification | Yes/No |
| I have provided comment on the qualification content | Yes/No |
| I agree to the outcome of the review | Yes/No |

If you do not agree to the outcome of the review or have any other comments please enter them in the box below:

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Signed** | **Date** |
|  |  |

Please complete this form and return it to

|  |
| --- |
| [qualifications@ringahora.nz](mailto:qualifications@ringahora.nz) |

This form will be submitted to NZQA as part of the qualification review application.