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| TVI/Company Name | **:** |  |  | TESDA-OP-IAS-01-F04-C |
| Registered Program | **:** |  |  | Rev. No. 00 – 05/28/2020 |
| Date of Audit | **:** |  |  |  |

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| **COMPLIANCE AUDIT REQUIREMENTS CHECKLIST FOR REGISTERED MOBILE TRAINING PROGRAMS (MTP)** | | | | | | | | | | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| **PO Level** | | | | | | | | | |
| TVI’s documents filed in PO   * *The conduct of compliance audit of the concerned TVI shall not be deferred even if* no program registration documents to be audited on-file at the Provincial Office. | | Examination of documentary evidence | | Check completeness and validity of TVI’s documents filed in PO. | | TVI’s documents submitted to PO are complete and updated. |  | |
| **TVI Level** | | | | | | | | | |
| **A. Corporate and Administrative Documents** | | | | | | | | | |
| Letter of application/Intent | | Examination of documentary evidence. | | Request a copy of the letter of application. | | Same copy of letter of application stamped received by concerned TESDA PO. |  | |
| Board Resolution/ Academic Council Resolution to offer the program signed by the Board Secretary and attested by the Chairperson (SUCs, LCUs, and private institutions) | | Examination of documentary evidence. | | Request a copy of the Board Resolution/Academic Council Resolution to offer the program.   * Are all the programs supported by above-mentioned Resolutions? | | Same copy of Board Resolution/Academic Council Resolution to offer the program filed at TESDA PO. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| Special law creating the institution (for public institution) e.g. Republic Act, Executive Order, Sangguniang Resolutions) | | Examination of documentary evidence. | | Request a copy the law that created the institution. | | The law whether R.A. or local legislation clearly mentions the establishment of the institution. |  | |
| Securities and Exchange Commission (SEC) Registration for private institutions (must specifically cover the training delivery site) | | Examination of documentary evidence. | | * Request a copy of the SEC registration. * Request a copy of the updated General Information Sheet (GIS). * When was the actual conduct of annual stockholders’/members meeting?   *(All corporations shall file their GIS within 30 calendar days from the date of actual annual stockholders' meeting as provided under SEC Memorandum Circular No.1 series of 2019 item no. II)* | | Updated SEC registration and General Information Sheet (GIS). |  | |
| Articles of Incorporation and By-laws | | Examination of documentary evidence. | | Request a copy of the Articles of Incorporation and By-laws. | | The Articles of Incorporation mentions TVET in its purpose and covers the training delivery site and is valid. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| For institutions that will branch out, the Articles of Incorporation and By-laws must state reasons for opening of the branch. The Articles of Incorporators signed by majority must be notarized, received and noted by SEC. | | Examination of documentary evidence. | | Request a copy of the Articles of Incorporation and By-laws. | | The Articles of Incorporation and By-laws clearly states the reasons for opening of the branch. The majority of the Incorporators signed the Board Resolution which is notarized and stamped received by SEC. |  | |
| Proof of building ownership or contract of lease (covering at least two years) of the **Physical Office** upon application for new program. For succeeding application, a valid contract of lease. | | Examination of documentary evidence. | | Request a copy of proof of building ownership, or contract of lease of the Physical Office.   * If leased, how many years? (covering at least one year renewable upon application for new program) * If building is owned by one (1) of the incorporators and is not leased by the TVI, is there a valid Building/Facility Use Agreement of the building? | | Proof of ownership is authentic and valid. Contract of lease has not expired. Building/Facility Use Agreement authentic and valid.  Certification from the Lessor that the Contract of Lease is renewable. |  | |
| Current Fire Safety Certificate | | Examination of documentary evidence. | | Request a copy of the Fire Safety Certificate.   * Is the Fire Safety Certificate current? | | Fire Safety Certificate is valid/ has not expired. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| Proof of Self-Contained Mobile Vehicle or Non-Movable Training Venue | | Examination of documentary evidence. | | Request a copy of proof of Self-Contained Mobile Vehicle or non-Movable Training Venue. | | Copy of the updated Official Receipt (OR) and Certificate of Registration (CR) of the Self-Contained Mobile Vehicle.  Copy of either of the following documents for Non-Movable Training Venue:   * Valid and unexpired Memorandum of Agreement (MOA) with the training partner for the venue. * Rental Contract of the venue (coverage of which shall only be within the duration of the training) |  | |
| CTPR of the registered Institution-based program similar to the Qualifications offered under the MTP training modality. | | Examination of documentary evidence. | | Request a copy of the CTPR of the registered Institution-based program which the MTP was based. (CTPR must be issued by the Region where the MTPs is implemented) | | Copy of valid CTPR of the registered Institution-based program which the MTP was based. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| **B. Curricular Requirements** | | | | | | | | | | |
| Competency-based Curriculum indicating the qualification being addressed and the competencies to be developed   * Course Design * Modules of Instruction | | Examination of curriculum documents. | | Does the course design include the following:   * Course description * Qualification level * Duration * Entry requirements * Course structure specifying units of competency covered by the course and the corresponding module; Are the basic and common competencies embedded in the implementation of core competencies? * Title – Learning outcomes and nominal duration in accordance with the TR and approved Certificate of TVET Program Registration (CTPR) * Program delivery * Assessment method * Trainer/s qualifications * Resource requirements | | * Course title the same as or similar to the title of the promulgated Training Regulations (TR) * Course design is based on work that must be performed (course description of modules include the scope, coverage and delimitation specified in the TR) * Competency-based curriculum * Institutional assessment tools |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| * Curriculum Design | | Interview of:   * TVI Academic Head * Trainer * Selected students/trainees | | Recite competencies to be achieved for the course | | Units of Competency stated in the Training Regulations (TR) |  | |
| * Modules of Instruction * Learning Outcomes (Continuous Assessment Results) | | * Examination of Modules of Instruction * Document evaluation * Demonstration/Observation | | Does the modules of instruction contain the following:   * Learning outcomes/contents (specifies what the learners will learn, acquire and apply) * Condition for assessment * Assessment criteria/methods (describes how the performance of competency is measured) | | * The Modules of Instruction are based on defined units of competencies (i.e. elements, required knowledge, required skills, performance criteria) and completely addresses the scope of its CTPR. |  | |
| * Interview of Trainer | | * Check in what modules current and past lessons you are in? | | * Results of Institutional Assessment |  | |
| * Can you show me the results of the institutional assessment of the following students/trainees? | | * Presence of institutional assessment results. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| * Modules of Instruction * Learning Outcomes (Continuous Assessment Results) | | * Interview of selected students /trainees * Document review | | * What modules have you completed? * What competencies can you demonstrate? | | * Progress Chart * Interviewed trainees are able to articulate the modules completed & can demonstrate/ perform the competency asked. |  | |
| * Program Delivery * Program Design and Session Plans | | Document evaluation to show congruence of curriculum, program design and session plans  Interview the:   * Trainor * TVI Academic Head | | * What instructional materials are available? How often are the materials updated? * Can you please show me the following instructional materials? * Actual checking of instructional materials. If they are borrowed there is proof (e.g. borrower’s card) of such. | | * Are the training methods enough to achieve the competency? * List of Instructional Materials   (such as reference materials, slides, videotapes, internet access and library resources) necessary to deliver the program.   * Currency of Library holdings |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| * The concerned TVI with registered MTPs shall provide a notification letter to the District/Provincial Office indicating the date of program implementation, five (5) working days before the actual conduct of training to facilitate the conduct of inspection. | | Examination of documentary evidence. | | Request a copy of the Notification Letter submitted to and stamped received by the District/Provincial Office. | | Copy of the submitted Notification Letter duly signed by the TVI officer/authorized personnel and stamped received by the District/Provincial Office five (5) working days before the actual conduct of training.  Copy of the duly accomplished Inspection Report of DO’s/PO’s conduct of technical inspection five (5) working days before the actual conduct of training. |  | |
| * Modular structure (according to units specified for the course) * Learning materials used | | * Interview students/ trainees * Demonstration/Observation | | * How are the modules presented? * What training methodologies are used? (e.g. lecture, demo, role playing, film showing, etc.) * Are there requirements needed to advance to the next module? * How often does the trainer provide feedback? | | Feedback from trainees and competency-based learning materials are provided to them. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| Tools, equipment and materials necessary to deliver the program. | | Actual inspection  and of sampled tools, equipment and materials | | * Are the following forms present, properly accomplished and signed?   1. List of Equipment – TESDA-OP-CO-01-F13   2. List of Tools - TESDA-OP-CO-01-F14   3. List of Consumables/Materials - TESDA-OP-CO-01-F15 * Can you show me the following tools, equipment and materials?   (The set of equipment, tools and training materials for the delivery of MTP **MUST** be separate from the TVI’s registered institution-based program)   * How do they ensure that all tools and equipment borrowed or used during classes are returned? * Is there a designated tool keeper? | | * Lists of Tools, equipment and materials are present, properly accomplished and signed * Presence on site of the requested tools, equipment and materials.   *(same as Program Registration Lists of Tools, Equipment & Materials and follows the minimum requirements in the TR)*   * Actual physical count of Tools, equipment and materials matches the number declared per List of Tools, equipment and materials. * Designation of a tool keeper |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| Tools, equipment and materials necessary to deliver the program. | | Testing of sampled equipment coupled with questioning. | | * Can you please show me how to operate this equipment? * Are tools and equipment serviceable and in good working condition? * How often do they conduct maintenance of tools and equipment? * What procedures do they follow if tools and equipment are out of order? | | * The sampled equipment should be in good working condition. * Maintenance Schedule   (Inspection checklist for maintenance of tools, etc.)   * Written procedure. |  | |
| List of Physical Facilities & Off-Campus Physical Facilities indicating floor area. | | Actual inspection of physical facilities and its floor area. | | * Are the following forms present, properly accomplished and signed?  1. List of Physical Facilities – TESDA-OP-CO-01-F17 2. List of Off-Campus Facilities - TESDA-OP-CO-01-F18  * Can I have a tour of your physical facilities? * Can the physical facilities accommodate the students/ trainees per batch? * How often do they conduct maintenance of the physical facilities? | | * Lists of Physical Facilities and Off-Campus Facilities are present, properly accomplished and signed. * The physical facilities satisfy the requirements in the TR. * Provisions in the Memorandum of Agreement (MOA) for Off-Campus Physical Facilities * Maintenance Schedule   (Inspect checklist for maintenance of physical facilities) |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| Design/layout of training mobile vehicle or non-movable training venue indicating the floor area | | Actual inspection of the training. facility using the layout provided. | | Can you show me the design/ layout of your training mobile vehicle or non-movable training venue? | | The actual design/layout of the training mobile vehicle or non-movable training venue matches the indicated floor area and arrangements in the design/layout document. |  | |
| 1. **Faculty and Personnel** | | | | | | | | |
| List of officials, teaching and non-teaching staff | | Comparison of the list in the PO file with the existing staff complement in the institution including the supporting documents. | | * Are the following forms present, properly accomplished and signed?  1. List of Officials – TESDA-OP-CO-01-F19 2. List of Trainers - TESDA-OP-CO-01-F20 3. List of Non-Teaching Staff - TESDA-OP-CO-01-F21 | | * Lists of Officials, Trainers and Non-Teaching Staff are present, properly accomplished and signed. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| List of officials, teaching and non-teaching staff | | Comparison of the list in the PO file with the existing staff complement in the institution including the supporting documents. | | * Can you show me your manning list or organizational structure? * Can you show me the contracts of employment and relevant certificates of the personnel on this list? | | * The list matches that of the PO list including the supporting documents. Should there be changes especially with the trainer/s, the replacement meets the qualification requirements and the changes have been informed to the PO and approval of the RO thereafter is required. (TESDA Circular No. 094, s.2019 dated 09/02/2019). * In case of change of Designated Trainer/s, presence of Letter of Approval issued by the RO in the program registration documents of the TVI and posted beside the CTPR of the concerned registered program. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding/s** | |
| List of teaching staff | | Comparison of the list in the PO file with the existing staff complement in the institution including the supporting documents. | | * For WTR Program / defined Cluster of Competencies:   Does the trainer of the program have a valid National TVET Trainer’s Certificate (NTTC)?   * The TVI should have a separate Trainer for their institution-based registered program and for their MTP. In case the trainer is for both the institution-based program and MTP, a training schedule should be submitted by the TVI. | | * Trainer of WTR program must be a holder of an unexpired National TVET Trainer Certificate (NTTC) relevant to the registered program   *(must follow those specified in the TR under Sec. 3.6 Trainer’s Qualifications)*   * Submitted Training Schedule by the TVI stamped received by the District/Provincial Office |  | |
| 1. **Program Guidelines** | | | | | | | | |
| Schedule and breakdown of tuition and other fees (duly signed by the school head indicating the effectivity of school year) | | Document comparison of the submitted schedule and breakdown of tuition & other fees and the existing tuition & other fees rate. | | Can you show me the breakdown of current fees you collect from your students/ trainees? | | The current fees match what is submitted in the registration documents on the schedule and breakdown of tuition fees. Should there be an increase in fees, it should comply with the requirements of TESDA Circular 32 s.1998. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding** | |
| Documented grading system, details of which are provided to students/trainees at the start of their program | | * Sampling of students/ trainees grades. * Interview of sampled students/trainees to confirm if their grades match what is indicated in the grading system submitted for program registration. | | Can you show me your grading system.   * In the modules that you have completed how were you graded? * Before the start of your course have you been provided information on how you will be graded? | | * The existing grading system matches what is indicated in the program registration documents. * Proof of grades provided for completed modules. * Student handbook or any publication containing grading system. |  | |
| Trainees entry requirements complying with the relevant TR, or if applicable, the hiring industry or relevant industry sector may include additional entry requirements for the program. | | Sampling of accepted students/ trainees for the program. | | Can you show me the files of the following students/trainees when they were accepted to the program?  Does the trainee’s entry requirements satisfy the requirement of the program? | | The qualifications of the students/trainees as far as their documentary credentials are concerned satisfies the TR requirements or additional entry requirements aside those specified in the TR. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding** | |
| Rules of attendance | | * Sampling of students/ trainees. * Compare the submitted rules on attendance with any existing case of a student/ trainee that violated the rules, if any. | | * Are you aware that you have to comply with certain rules on attendance when you were accepted in the course? * Have you had cases of students/trainees who violated the rules on attendance? * What did you do? | | * The students/ trainees are informed about the rules on attendance. There is evidence of this e.g. in the student handbook or other publications. * Presence of documentary evidence that led to the resolution of the case. |  | |
| 1. **Support Services** | | | | | | | | |
| Health services are available to the students/trainees (if these services are contracted out or outsourced, the contract or MOA or similar documents must be submitted) | | On site inspection of health service facility and interview of the health service provider professional. | | * How many students/ trainees have availed of the health service facility that you provide? * What are these health services? * Do you have records of this service provision? | | * Existing health service facility available. * Record of students/ trainees that availed of the health services. * Valid MOA with health service provider if contracted out. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding** | |
| Job Linkaging Services | | Interview of designated Career Guidance Service Officer. | | What career guidance service and employment services do you provide? | | Evidence may include any of the following:   * Career Profiling Results/ Career Services * Tracking or tracer of graduates * List of partner companies * Job facilitation programs for graduates * Documented stories of successful graduates |  | |
| 1. **Other Requirements** | | | | | | | | |
| Signage in Offering TVET Registered Program/s | | On site inspection of TVI Signage of Registered Programs | | Does the signage contain the following:   * the title and duration of the program * the status of registered programs whether WTR or NTR with TESDA registration/CTPR number * date when the CTPR was issued | | Signage in accordance with Section 16 of TESDA Circular No. 7 series of 2016 |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding** | |
| Data Management and Security in Program Registration  *(Item No. 3 Section XV of TESDA Circular No. 07 s.2016 re: Amended Omnibus Guidelines on UTPRAS)* | | Examination of documentary evidence. | | Request a copy of TVI’s transmittal letter of its submission to the District/Provincial Office of the digitized copy of the following students/learners credentials not later than one month after completion of the program/s:   1. Transcript of Records; or 2. Diploma or certificate of Training stating the units of competency achieved | | Copy of the submitted Transmittal Letter duly signed by the TVI officer/authorized personnel and stamped received by the District/Provincial Office |  | |
| 1. **Mandatory Assessment (WTR) and submission of MIS 03-02** | | | | | | | | | |
| Assessment of graduating students/ trainees (for WTR programs with assessment tools) | | Sampling of graduates in the Registry of Workers Assessed and Certified (RWAC) and MIS 03-02 | | How do you implement the mandatory assessment for graduating students? | | Sampled students/trainees are found in the RWAC and MIS 03-02 taken from the PO file. |  | |
| **Registration Requirements** | | **Methodology** | | **Process/ Question** | | **Evidence** | **Finding** | |
| Assessment of graduating students/ trainees (for WTR programs with assessment tools) | | Sampling of graduates in the Registry of Workers Assessed and Certified (RWAC) and MIS 03-02 | | * How many enrolled and graduated per program? * How often do you submit the enrolment, graduate and employment reports? | | * Employment report of students/trainees. * RWAC and the MIS 03-02 stamped received by PO. |  | |
| 1. **Program Performance Measures** | | | | | | | | |
| WTR Program’s certification rate lower than the national sectoral average rate for three (3) consecutive batches | | Examination of RWAC and MIS 03-02 report for three (3) consecutive batches | | Check/review RWAC and accomplished MIS 03-02 report against the national sectoral average certification rate | | * RWAC * National Sectoral Average Certification rate * MIS 03-02 |  | |
| **Other Observations:** | |  | | | | | |
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| **Submitted by:** | | | | | | |
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