* New invigilators must be observed conducting their first live exam session
* Thereafter, all active invigilators must be observed annually
* Observations must be conducted by a BCS registered member of staff
* This report must be signed by all named on the report on the day of the observation, stored electronically and made available to BCS upon request

|  |  |  |  |
| --- | --- | --- | --- |
| Centre Name: |  | | |
| Number of Candidates Present: |  | Centre ID No: |  |
| Name of Invigilator: |  | | |
| Name of Observer: |  | | |
| Date of Observation: |  | Observation Start Time: |  |
| Exam Start Time: |  | Exam End Time: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | Y/N/NA |  | | Y/N/NA |
| Is the invigilator the same member of staff listed as invigilator on the exam booking? | |  | Did the invigilator inform the candidates of the required exam procedures? | |  |
| Have the candidate IDs been checked and verified? | |  | Are candidates aware of the appeals procedure? | |  |
| Did the invigilator check the candidates are registered with BCS for the knowledge module for which they are taking an exam? | |  | Has the invigilator ensured there was no outside assistance during the exam? | |  |
| Did the invigilator take account of any previous tests taken? | |  | Was the invigilator present throughout the whole exam? | |  |
| Is the environment for the exam quiet and safe? | |  | If a candidate left and then returned to the exam area, were they accompanied throughout this time? | |  |
| In the case of candidates with approved reasonable adjustments, were all requirements catered for? | |  | Have all exam files/printouts/disks (removable storage devices) been submitted to the invigilator? | |  |
| Where applicable, has the use of headphones been offered? | |  | In the case of a test interruption / incident, was it recorded on e-Professional? | |  |
| Use this space to record any comments or feedback to the invigilator, including areas for improvement: | | | | | |
|  | | | | | |
| Signature of Invigilator: |  | | | Date: | |
| Signature of Observer: |  | | | Date: | |