

**Unit CB1K: Knowledge of gathering and submitting information to support law enforcement objectives within a policing context**

**CANDIDATE EVIDENCE CHECKLIST**

| CENTRE NUMBER:  | CANDIDATE NAME:  |                     |                |
|---|--|---------------------|----------------|
| ASSESSMENT REQUIREMENT  |  | Portfolio reference | Date completed |
| a) Understand relevant legal and Service requirements related to gathering and submitting information (Assessment criteria 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7) | <b>ONE</b> description of <b>TWO</b> pieces of legislation and <b>TWO</b> pieces of national policy / guidelines in relation to gathering, submitting, retaining, recording and disseminating information. |                     |                |
|   | <b>ONE</b> description of <b>TWO</b> types and <b>TWO</b> sources of information that have potential to support law enforcement  |                     |                |
|   | <b>One</b> explanation of how information and sources of information are graded for intelligence   |                     |                |
|   | <b>One</b> explanation of an appropriate intelligence model which includes how that model fits within the organisation. For example; the National Intelligence Model                                       |                     |                |
|   | <b>ONE</b> explanation of why it is important to maintain security, integrity and continuity of information and how this is achieved within the organisation.  |                     |                |

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|--|---|--|--|
|  | <b>ONE</b> definition of how to distinguish between information and evidence, to include <b>ONE</b> description of the procedures to follow for each.       |  |  |
|  | <b>ONE</b> explanation identifying the lawful and ethical methods of gathering information to ensure maintenance of security, integrity and confidentiality |  |  |

I confirm that the evidence provided is a result of my own work.

Signature of candidate: \_\_\_\_\_

Date: \_\_\_\_\_

I confirm that the candidate has met all of the assessment requirements for this unit.

Signature of Assessor: \_\_\_\_\_

Name (block capitals): \_\_\_\_\_

Date: \_\_\_\_\_