



Assessment Center Evaluation Form

مجلس أبوظبي
للجودة والمطابقة
Abu Dhabi Quality &
Conformity Council



The following form is for the Assessment Center Empanelment with Quality assurance process, under which the Assessment Centers' are evaluated against the required requirements. The Empanelment focuses on learning, self-development and encourages the Assessment Center to pursue continual excellence. The process involves guarding the Assessment Centers as per their adherence to the laid down assessment Center evaluation guidelines digitally and physically.

Assessment Center Details		
	To be filled by Assessment Center	To be filled by Evaluator
Name of Assessment Center Provider	EMIRATES DRIVING COMPANY	
Assessment Center Name	EDC-MADINAT ZAYED	
Type of Assessment Center, please specify from below options: (1) TP Owned (2) Proprietorship (3) Outsourced (4) Franchised	1	
Website (if any)	www.edcad.ae	
Social Media Link (if any)	edcabdudhabi (instagram)	
Availability of Security/ Security Guards at the Center? Please specify - Yes/ No	yes	
Availability of Biometric Attendance System		
Proximity of Center to Public Transport System, please specify from below options: (1) 0 - 3 Km (2) 3.1 - 5 Km (3) 5.1 - 10 Km (4) More than 10 Km	1	
Name of Nearest Bus/Metro/Railway Station	MZ bus station	
Building Status, please specify from below options:		
1. Stand Alone Building	yes	
2. Industrial/Commercial Building		
3. Educational Institute/Residential Building		
Type of Construction of Building, please specify from the below options: (1) Pre fabricated (2) Not pre fabricated	2	
Is the Assessment Center well plastered, colored distempered/whitewashed, please specify - Yes/ No	yes	
Assessment Center walls and roof made of Tin / Bamboo sheets, please specify Yes/ No	no	
Center Floor is cemented and furnished, please specify - Yes/ No	yes	
Center Floor is tiled, please specify - Yes/ No	yes	

Front Face of the Building, please specify from the below options:		
1. Glass and aluminium sliding window	yes	
2. Glass Cover		
3. Reinforced Cement Concrete (RCC)		
4. Others		
Approach Road to the Center (Please write the approximate width of the Road approaching the Center Entrance)		
Is the Center easily accessible, please specify - Yes/ No	yes	
Availability of Internet, please specify from below options:		
1. Speed of 1 MBPS and above	yes	
2. Speed of Less Than 1 MBPS & Greater Than 512 KBPS		
3. Speed of Less Than 512 KBPS		
4. Internet not Available		
Adequate Power Backup (UPS/ GenSet/Inverter) Please specify - Yes/ No	yes	
Contact Details		
SPOC Name	MOHAMMED YASLAM	
SPOC Mobile	559345667	
SPOC Alternate Number	554838150	
SPOC Email ID	m.salem@edcad.ae	
Name of Center Principal/ Director	MOHAMMED YASLAM	
Contact Number of Center Principal/ Director	559345667	
Email Address of Center Principal/ Director	m.salem@edcad.ae	
Commendations and International Affiliations		
Affiliation Name		
Type of Affiliation, please specify from below options: (1) National (2) International	1	
Center Address		
Country	uae	
Province/State	abu dhabi	
City/Area	madinat zayed -westren region	
Landmark	near shooting club	
Address Lane 1	lakhweerah street	
Pin Code / ZIP Code		

Center Area Details		
Total Assessment Center Area (Sq.M / Sq.Ft) (The Total Center Area should be a sum of Total Theoretical Lab Area, Total Lab Area, and other Center Areas)	115223 SQM	
Theoretical Lab Area (Sq.M / Sq.Ft)	2X28 SQM/VK 48.8SQM	
Computer Lab Area (Sq.M / Sq.Ft)	23.211 SQM	
Is the entire Center situated at Ground Floor?	YES	
Other Details		
Availability of Air Conditioning	yes	
Availability of CCTV Camera with Recording Facility, please specify - Yes/ No	yes	
Number of Computer Labs available	1	
Availability of Theory lab devices (Specify the device and No of computers/Tablets/Laptops)	2	
Availability of Practical lab devices (Specify the device and No of Tablets available)		NA
Reception Area availability	yes	
Registration PC/Laptop	yes	
Camera for validation of the candidates attached to the registration PC	yes	
Availability of Printer	yes	
Waiting Area for candidates while validation process	yes	
Availability of TV	yes	
Marketing material - Availability of Branding collateral alined as per QCC/UAC guidelines	yes	
Availability of Dustbin in the Room, please specify - Yes/ No	yes	
Facilities		
	To be filled by Assessment Center	To be filled by Evaluator
Differently Abled Friendly Details		
Availability of Ramps at the entrance of the Center, please specify - Yes/ No	yes	
Availability of Lifts in case the Center is extended to other floors(besides ground floor), please specify - Yes/ No	yes	
Hygiene and Sanitation		
Availability of a Dedicated Housekeeping Staff, please specify - Yes/ No	yes	
Washroom is Clean and Hygienic, please specify - Yes/ No	yes	
Availability of Daily inspection card/ checklist in the Washroom, please specify - Yes/ No	yes	
Availability of Safe Drinking Water, please specify from below options: (1) Reverse Osmosis (2) Water Purifier (3) Packaged Drinking Water Dispenser (4) None	yes all	

Center Staff Details		
	To be filled by Assessment Center	To be filled by Evaluator
Availability of Following Staff:		
1.Receptionist / Front Office Coordinator - Yes/No	yes	
2.Counselor - Yes/No	yes	
3.Administration Officer - Yes/No	yes	
4.IT Coordinator - Yes/No		
Kindly add rows to provide above Information for additional Staff		
Job Role Details		
	To be filled by Assessment Center	To be filled by Evaluator
	Job Role	
Skill Sector 1		
Job Role 1		
Skill Sector 2		
Job Role 1		
Job Role 2		
Kindly add rows to provide above Information for additional Job Roles		
Laboratory Details		
	To be filled by Assessment Center	To be filled by Evaluator
	Lab 1	
Laboratory Title		
Availability of Internet		
Availability Of Air Conditioner, please specify - Yes/ No		
Carpet Area (In Sq.Ft)		
Availability of Dustbin in the Lab, please specify - Yes/ No		
Contact of Fire Brigade, Ambulance , Hospital Emergency Numbers displayed in the Lab, please specify - Yes/ No		
Kindly add rows to provide above Information for additional Labs		
Medical & Safety		
Availability of Fire Fighting Equipment	yes	
Specify the type of Fire Extinguisher	yes	
Fire Fighting hose Pipe Yes/No	yes	
Is the First Aid kit wall mounted at the Center, please specify Yes/ No	yes	
Contact of Fire Brigade , Ambulance, Hospital, Emergency Numbers displayed in the Reception Area, please specify Yes/ No	yes	

Assessor(s)' Details		
	To be filled by Assessment Center	To be filled by Evaluator
Availability of Trained Staff as Per Occupation - Yes/No	yes	
Name	Sameer Valiyil	
Sector	training	
Jobrole	team leader	
Education Background	Bachlor	
Total Years of Experience	9	
Out of Total Experience, Sector related experience (in yrs)	4	
Out of Total Experience, Teaching Industry experience (in yrs)		
Email	s.valiyil@edcad.ae	
Mobile Number	554838150	
Assessor's 'CV' Submission		
To be Filled by Evaluator		
Recommended		
Provisional		
Not Recommended		
Reinspection Yes/No		If Yes, Provide Date of Inspection :
Remarks :	Evaluation Date:	
	Evaluator Name:	
	Evaluator Designation:	
	Evaluator Signature	