

# EXAM RESULTS THIRD PARTY COLLECTION



## PERMISSION TO COLLECT A CANDIDATE'S EXAM RESULTS

To Student: Please print and complete this form

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

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

### TO: Examinations Office

I am unable to collect my exam results in person from school, and therefore, give permission for: \_\_\_\_\_ to collect them on my behalf.

**He/she will bring proof of identity and a copy of this form to enable you to release my exam results.**

Yours faithfully

\_\_\_\_\_  
(Signature) Reg Group: \_\_\_\_\_

Exam/Candidate Number: \_\_\_\_\_

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This form must be handed in when collecting exam results by the nominated person named above.

Office Use Only: I.D Checked – please initial