CERTIFICATE COLLECTION

PERMISSION TO COLLECT CANDIDATE'S CERTIFICATES

TO STUDENT:

Please complete this form to authorise collection of your certificates, or provide permission for a representative to collect on your behalf. The representative would also need to bring some form of their own identification.

Legal First Name:		Legal Surname:		
Candidate Number		DOB		
Address:				
Contact Number:				
Email:				
TO: EXAMINATIO	NS OFFICE			
COLLECTING MY CER	ΓΙFICATES			
I,am col person from school, and have provided proof of my ide		collecting my certificated dentity.	ates in	Driving Licence Passport Oyster Card Student ID Other
Student Signature:			Date	
				-
INADIE TO COLLECT	NAV CERTIFICATES			
JNABLE TO COLLECT				:
school, and therefore,	give permission for:	unable to collect my	certificates	in person from
Collectors Name:			to collect them on my behalf.	
He/she will bring proomy certificates. Yours	f of identity and this completed faithfully	d notification to enab	le Highams	Park School to release
Student Signature:			Form Group:	
Student Signature:			xam/Candi Iumber	date
Student Signature: Student Print Name			umber	
-		N	Date	

Office Use Only: I.D. Checked – please initial