

Exam Results

Exam Result collection information and Candidate permission form

Candidate Name	
Candidates Date of Birth	
If you wish to grant permission complete the details below.	to allow someone to collect Results on your behalf, please
I give permission for my representative:	
	I confirm that my representative will provide photographic ID on rm collection and that my personal details and grades are correct.
Checking results	
•	fully check that the personal information (name and date of birth), is sign that you have collected the results and the details are correct.
In case of query, please contact examinations@kings.lincs.sch.u	t Susan Syddall on 01476 563180 or email: <u>k</u>
Candidate Signature:	
Date	