

PERMISSION FORM: Certificate Collection 2024/25

If you are unable to collect your certificates in person, please indicate below the details of your nominated representative.

Candidate Name	Email Address	Teleph	one Number
I give permission for my representative: (insert name of representative here) to collect certificates on my behalf.			
Relationship to nominated representative: (insert relationship to representative here)			
I confirm that my representative will provide photographic ID on collection and will sign to confirm collection and that my personal details and grades are correct.			
Candidate Signature		Date	