**Form to request Post Result Services**

**(Enquiries about Results and Access to Scripts)**

At the beginning of term completed forms should be returned to Mrs Duguid including confirmation that the bank transfer has been completed. Additional forms are available from The Ladies’ College Reception or can be downloaded from [www.ladiescollege.com](http://www.ladiescollege.com) under “Information” and then “Examinations”, if required.

Failure to provide all the information requested below will result in a delay in the processing of the request which may lead to the deadline being missed and the request not being submitted. Please note that *Candidate number* (which may be different at each centre) and *Exam code* can be foundon your statement of results.

|  |  |
| --- | --- |
| **Candidate No.** | **Candidate Name:** |
|  |  |
| **Centre**  | **Preferred e-mail address (for receiving outcomes / copies of scripts**): |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Specific exam paper name & number** **(not just the subject)** | **Exam Board** | **Exam code** | **Service(s) required (1-6)** | **Fee** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Total fee**  | £ |

☐ I confirm that the bank transfer has been sent to the following bank account

The Ladies’ College

**Sort code: 60 09 20**

**Account: 06017614**

Ref *surname/exams*

**For services 1-3:**

I give my consent to the head of my examination centre to make an enquiry about the result of the examination(s) listed above. In giving consent I understand that the final subject grade awarded to me may be lower than, higher than, or the same as the grade which was originally awarded for this subject.

**For services 4 and 6 (please tick the appropriate box):**

|  |
| --- |
| [ ]  I do not wish to allow subject teachers any access to my script(s). |
| [ ]  I consent to subject teacher access only. |
| [ ]  I consent to subject teacher access and anonymised use of the script(s) with students. |
| [ ]  I consent to subject teacher access and use of script(s) with students in their original form.  |

**Signed: …………………………………………………………….. Date: ………………………..**