**Results for Third Party Collection or Posting**

**Student to complete all sections of this form:**

Student Name:……………………………………………………………………………….

Address:.………………………………………………………………………………………

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

Date: ………………………………………

**To Examination Officer:**

Please send my results by first class post to the above address

**OR:**

I am unable to collect my results in person from school, and therefore give

permission for (enter name) ………………………………………………………………..

to collect them on my behalf.

He/she will bring proof of identity and a copy of this notification to enable you to

release my results

Yours sincerely

Student Signature: …………………………………………………. .………………...

Exam/candidate number: ………………………………………………………..................

This form must be handed to the Exams Officer prior to results day or for the nominated person to being with them, plus I.D. on results day.

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