

Private Candidate Examination Entry Form

PLEASE COMPLETE USING BLOCK CAPITALS

Section 1 Personal Details

Surname		First Name	Middle or other name (s)	
Title	Gender	Date of Birth	Email Address	
THE	Octidor	Bate of Birth	Email / Idai cos	
Address (including	ng postcode)			
Contact telephone number (s) (please		Enter any previous known exam numbers		
include home an	id mobile)	1101		
		UCI:		
		ULN:		
Next of kin details (Name)		Next of kin contact telephone number		

Section 2 Examination Details							
Qualification type e.g. GCSE	Awarding body		Exam series (month & ye	ar)			
				,			
Specification (Subject) title	Specification (Ent	ry)	Unit entry code(s) (if applicable)				
Section 3 ACCESS ARRANGEME	NTS or other info	rmation	relevant to your entry				
Are you eligible for access arrangements in examinations? Appropriate evidence must be provided to support this							
This does not guarantee access arrangements approval. Further communication on this will follow in due course. Consideration will be given to any access arrangements or reasonable adjustments that may need to be put in place. Where appropriate, the centre will lead on the required process in identifying the need for, requesting and implementing access arrangements.							
Section 4 IDENTIFICATION – pho		quired	to verify your identity				
Driving Licence Number or Passpo	Copy of ph	noto driving licence OR copy of photo page of passport must					
Confirmation statement			FOR EXAMS OFFICE US				
By signing here, I am confirming I and points within the Information for	Initial payment received £	YES/ NO					
Private Candidate Policy:	Evidence to support AA received						
	Copy of photo ID attached	YES/ NO					
Date of Signature:							

Please return you completed form to:

Examinations Department

Halesowen College

Whittingham Road

Halesowen

West Midlands

B63 3NA

Or email: exams@halesowen.ac.uk

^{*}If the centre agrees to accommodate your exam(s), the original of this photo ID must be bought to each exam/assessment.