ASPIRE | BELIEVE | SUCCEED



EXAMINATION RESULTS AUTHORISATION – 2025

Authorisation for collection of results	
I give permission for	to collect my exam results on my behalf
Signed:	_ (to be signed by student)
Student Name:	(please print your name)
PLEASE NOTE - THE PERSON COLLECTING THE RESULTS MUST PRODUCE A FORM OF PHOTOGRAPHIC IDENTIFICATION, I.E. PASSPORT OR DRIVING LICENCE.	
Request for results to be posted	
Posted: Please enclose an A5 addressed envelope with a first-class stamp on.	
Signed:	(to be signed by student)
Student Name:	(please print your name)

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