

Section 1 – Personal Details

| | | | |
|--|--|----------------------------|--|
| Full Name | | Date of Birth (dd/mm/yyyy) | |
| Name if different at time of examination/s | | | |
| Current address (including postcode) | | | |
| Email address | | Telephone Number | |

Section 2 – Details of Examinations

| School/College name or Number <i>(if known)</i> | Candidate identifier – e.g. UCI, ULN or roll number <i>(if known)</i> | Year of examination | Season e.g. <i>summer</i> | Level of examination e.g. GCSE / A Level / AS Level |
|--|--|---------------------|---------------------------|--|
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Section 3 – Identification

You must attach **one** of the following ID. **Please do not send original documents as WJEC cannot be held responsible for any loss or damage.**

| | | | | | | | |
|-----------------|--------------------------|-------------------|--------------------------|----------|--------------------------|--------------|--------------------------|
| Driving Licence | <input type="checkbox"/> | Birth Certificate | <input type="checkbox"/> | Passport | <input type="checkbox"/> | Utility Bill | <input type="checkbox"/> |
|-----------------|--------------------------|-------------------|--------------------------|----------|--------------------------|--------------|--------------------------|

Section 4 – Declaration

| | | | |
|--|--|-------|--|
| I declare that the above details are correct and request that any information about me held by you is disclosed. | | | |
| Signature of candidate N.B Typing your name will be taken as being as binding as your signature | | Date: | |

Section 5 – Third party authorisation *(complete if applicable)*

| | |
|--|--|
| I hereby authorise <i>(name of third party)</i> | |
| <i>(email or postal address of third party)</i> | |
| To receive on my behalf the copy of the personal data requested by this application. | |
| Signature of candidate | |

This form when completed should be sent to: data.protection.officer@wjec.co.uk