TO: EXAMS OFFICE -

RE: CERTIFICATE COLLECTION AUTHORISATION

Please complete this section under all circumstances

Name of former stu	dent:	
(Please return to the Exa	ms Office or email <u>exams@sc.</u>	coastandvale.academy)
	Do NOT remove lo	wer portions
		ke alternative arrangements to receive your e), please also complete below:-
(Complete <u>EITHER</u>	this section
that they will need to brin	my GCSE certificates as I can ag along their own photograph order to receive my certificates.	(insert full name of person who will collect not collect them. This person understands ic identification (such as a passport or Please phone Mrs S Clark to agree a
Signed:	(Student)	Name:
	*** <u>OR</u> this sec	tion***
Please send my GCSE of	ertificates to me at home as I c	annot collect them.
My address is:		
I enclose a cheque (paya of special delivery.	able to COAST AND VALE LEA	RNING TRUST) for £7.65 to cover the cost
Signed:	(Student)	Name:
FOR OFFICE USE ON	LY	
Date received:	Amount received:	Date posted: