**Certificate collection form**

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| **Candidate name** |  | Yr 11 | Yr 12 | | Yr 13 | | 20.. |
| Certificates should be sent to my home address. A payment by bank transfer (details below) of £6.00 is necessary to cover the cost of secure postage. I confirm that I am taking full responsibility in case of loss of my certificates during the postal process and in case any details on my certificates are incorrect and that I have made the relevant payment.  Address Line 1  Address line 2  Address line 3  Postcode | | | | | | | |
| I give permission for my representative [ ………………………………………………………………..]  to collect certificates on my behalf. I confirm that my representative will provide photographic ID on collection and will sign to confirm collection and that my personal details and grades are correct. | | | | | | | |
| **Candidate signature** |  | | | Date | |  | |
| **Representative signature** |  | | | Date | |  | |
| *Sort code: 30-80-45, account number: 33977960, account name: Cheney School, reference: Cert+Surname* | | | | | | | |