

# THE ROYAL LATIN SCHOOL

## CERTIFICATES THIRD PARTY COLLECTION

PERMISSION TO COLLECT A CANDIDATE'S CERTIFICATES

To Student:

Please print and complete this form

\_\_\_\_\_ (Name)

\_\_\_\_\_ (Exam number)

\_\_\_\_\_ (Address 1)

\_\_\_\_\_ (Address 2)

\_\_\_\_\_ (Address 3)

\_\_\_\_\_ (Address 4)

\_\_\_\_\_ (Date)

To: Exams Office, The Royal Latin School

I am unable to collect my certificates in person from school, and therefore, give permission for \_\_\_\_\_ (Print Name) to collect them on my behalf.

**If the person collecting my certificates is not currently a student at The Royal Latin School, he/she will bring proof of identity and a copy of this notification to enable you to release my certificates.**

Yours faithfully

Student: Signature \_\_\_\_\_

Student: Print name \_\_\_\_\_

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This form must be handed in when collecting certificates by the nominated person named above for the collection of student certificates (as signed above).

Office use only: ID checked – please initial