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| Appendix B - Access to Scripts - Candidate consent form for access to and use of examination scripts | |
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AQA City & Guilds CCEA OCR Pearson WJEC

Access to Scripts

Candidate consent form for access to and use of examination scripts

|  |  |
| --- | --- |
| Centre number  **18151** | Centre name  **NOTRE DAME HIGH SCHOOL** |
| Candidate number | Candidate name |
| Qualification level/subject | Component unit/code |

 I consent to my scripts being accessed by my centre.

Tick ONE of the boxes below:

 If any of my scripts are used in the classroom, I do not wish anyone to know they are mine. My name and candidate number must be removed.

 If any of my scripts are used in the classroom, I have no objection to other people knowing they are mine.

Signed : Date