## Appendix B – Access to Scripts – Candidate consent form for access to and use of examination scripts



AQA	City & Guilds	CCEA	OCR	Pearson	WJEC
1.21	City & Guilds	CCLA	OCIX	r curson	NUDEC

## **Access to Scripts**

## Candidate consent form for access to and use of examination scripts

Centre number 25342	Centre name Thomas Estley Community College
Candidate number	Candidate name
Qualification level/subject	Component unit/code

 $\Box$  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: .....

This form should be retained on the centre's files for at least six months.