This form should be retained on the centre's files for at least 6 months following the outcome of the enquiry about results or any subsequent appeal.

WJEC BTEC PEARSON OCR City & Guilds

ACCESS TO SCRIPTS

Candidate consent form for use of examination scripts

Centre Number	Centre Name
68434	Ysgol Aberconwy
Unit title:	Unit code:
Candidate Number	Candidate Name
□ 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: