**EXTERNAL CANDIDATE APPLICATION FORM**

Please complete this form and return with copies of your ID.

| **Candidate Details** | | | | | |
| --- | --- | --- | --- | --- | --- |
| First Name | |  | | | |
| Middle Name | |  | | | |
| Surname | |  | | | |
| Date of birth |  | | Gender\* | Male | Female |
| Address | House Number | |  | | |
|  | Road | |  | | |
|  | Town/City | |  | | |
|  | County | |  | | |
|  | Postcode | |  | | |
| Email Address |  | | | | |
| Telephone |  | | | | |
| Emergency contact name |  | | | | |
| Telephone |  | | | | |

| **Exam History** | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| If you have taken any exams since 1998 you will have a Unique Candidate Identification code. It’s 12 digits and 1 letter. It will be on certificates or results statements. | | | | | | | | | | | | | | | |
| UCI |  |  |  | |  | |  |  |  |  |  |  |  |  |  |
| I do not have a UCI | | | |  | | | | | | | | | | | |
| My Previous School was | | | | | |  | | | | | | | | | |
| I left in | | | | | |  | | | | | | | | | |
| My ULN number | | | | | |  | | | | | | | | | |

| **Declaration** |
| --- |
| By signing this form I confirm that I have read and fully understood the terms and conditions in the external candidate information guide. I have obtained an up to date copy of the specification from the relevant awarding body.  PLEASE BE AWARE THAT FEES ARE NON RETURNABLE  I confirm that if any of the details change it is my responsibility to inform the Exams Officer at Connell Co-op College. If under 18 a parent or guardian should sign this form.  Signed Date |

**EXAMINATION SUBJECTS**

| Name |  |
| --- | --- |

| **Exam Board** | **Subject** | **Code** | **Level**  **(A Level/GCSE)** | **Resit?**  **Yes/No** |
| --- | --- | --- | --- | --- |
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**If you have indicated that any exams are resits and the qualification has coursework/practical endorsement /speaking & listening which has been previously awarded and is to be carried over, proof of this must be sent to the exams officer at the time of application.**

**Total amount to be paid £…………….**

**Candidate’s Signature…………………………………………………….**

**Date………………………………**