



### Post-Results Services Application Form

Candidate Name:				
Candidate Examination No:			Form:	
Candidate Mobile Phone No:				
Candidate E-mail address:				
Awarding Body and Qualification	Exam Code	Exam/Paper Title	Service No.*	Fee
				£
				£
				£
				£
				£
				£
<b>Total Due</b>				£

**\*Service Required:**

1. **Priority Mark** Review
2. **Priority** Copy of Script Return
3. Standard Mark Review
4. Copy of Original Script Return
5. Copy of Reviewed Script
6. Clerical Check

Enclose this form, with a cheque made payable to 'Royal Grammar School', in a sealed envelope and hand it directly to the Examinations Office by the deadline/s provided with your result statement. **Please write the Candidate Name and Service Required on the front of the envelope and back of the cheque.**

I give permission for Royal Grammar School to apply for the above post-results service/s on my behalf.

I understand that following a mark review the final subject grade and/or mark awarded to me might go up, down or stay the same.

Candidate's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

(If Candidate is under 18)

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**EXAMINATION OFFICE USE ONLY**

Name on Cheque:

Payment Date: