



Candidate Consent form for access to and use of examination scripts

AQA

OCR

Pearson

WJEC

Centre number: 28370	Centre name: South Nottinghamshire Academy
Candidate number	Candidate name
Qualification – A Level: <input type="checkbox"/> All exams that I sat in Summer 2025 or: <input type="checkbox"/> Mathematics/Biology <input type="checkbox"/> English Language/English Literature* <input type="checkbox"/> Chemistry/PE/Media Studies* <input type="checkbox"/> History/Computer Science* <input type="checkbox"/> Geography/Sociology* <input type="checkbox"/> Physics/Business Studies/Psychology* <input type="checkbox"/> Other – please specify below <i>Please tick all those subjects to which you consent and cross any for which you do not wish to access scripts.</i> <i>*Delete as applicable</i>	Component/unit code 7357/H420* 7702/7712* H432/H555/A680QS* H505/H446* 7037/7192* 7408/7132/7182* <i>All papers for each subject may be requested unless otherwise specified above.</i>

I consent to my scripts being accessed by my centre and shared with teaching staff.

You must **also 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.

Not all scripts for which permission is given will be accessed. If you require a copy of a script for your own purposes (such as considering a Review of Marking) please hand this form to Ms Hird or Mrs Cadman and indicate which scripts you require.

Signed: Date:.....

Requested scripts will be sent to your SNA school e-mail address; please monitor this e-mail address

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