

# STUDENT POST RESULT SERVICE APPLICATION

Please fill in all sections of this form in BLOCK CAPITALS

**Contact details:**

Candidate No.....Name:..... Tutor Group.....

**Student** school email.....

**Student** contact No .....

Services Available:

- ATS: Access to scripts
- Service 2P: Priority review of marking
- Service 1: Clerical re-check
- Service 2: Review of marking

Subject <small>Eg. Geog</small>	Unit Code/ Paper no. <small>As shown on statement of results</small>	Service required	Fee (per paper, not subject)	Date/Ref <small>(Office use only)</small>	Outcome <small>(Office use only)</small>
			£		
			£		
			£		
			£		
			£		
			£		
			£		
			£		
			£		
Total due					

Cheques should be made payable to: **King James’s School or pay by card in school**

I wish to request the services indicated above. In relation to a **review of marking/clerical check**: I give my consent to the Examinations Officer to make an enquiry about the result on my behalf and in doing so I understand that the final subject grade awarded to me may be **lower** than, **higher** than or the **same** as that which was originally awarded for this subject.

Signed: ..... (Student) Date.....