



## PRIVATE CANDIDATE ENTRY FORM (A-LEVEL)

Candidate Full Name:		Male: <input type="checkbox"/>		Female: <input type="checkbox"/>			
Address:		Post Code:					
Tel 1:		Tel 2:		Date of birth:			
Candidate email address:							
Parent email address, if appropriate:							
Exam Session:							
				May/June: <input type="checkbox"/>			
				Year: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
If you have sat public examinations before, please state your UCI number found on previous exam result slips (12 digits and one letter):				Have you sat exams at St. Albans Independent College in the past?			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				Yes: <input type="checkbox"/> No: <input type="checkbox"/>			
Do you have any special access arrangements during exams?							
No: <input type="checkbox"/> Extra Time: <input type="checkbox"/> Use of PC: <input type="checkbox"/> Other: <input type="checkbox"/>							
Please note that access arrangements can only be granted subject to meeting the current regulations laid down by Joint Council for Qualifications (JCQ).							
	<b>Subject</b>	<b>Exam Board</b>	<b>Subject Code</b>	<b>Unit Code</b>	<b>Unit Code</b>	<b>Unit Code</b>	<b>Unit Code</b>
	Modular Exams AS/A2 OUTGOING SPECIFICATION						
	Modular Exams AS/A2 OUTGOING SPECIFICATION						
	Modular Exams AS/A2 OUTGOING SPECIFICATION						
	A-LEVEL NEW SPECIFICATION						
	A-LEVEL NEW SPECIFICATION						
	A-LEVEL NEW SPECIFICATION						
	AS-LEVEL NEW SPECIFICATION						
	AS-LEVEL NEW SPECIFICATION						
Where are you studying for this exam:							
Current School: <input type="checkbox"/> Previous School: <input type="checkbox"/> Private Tutor: <input type="checkbox"/> Distance Learning: <input type="checkbox"/> Other: <input type="checkbox"/>							
Please give contact details:							
Candidate signature or parent signature (as appropriate):					Date:		