**NOTIFICATION OF ACCESS ARRANGEMENTS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Prep School** |       | **Examination Series** |       |
|  | **Subject** |       |
| **Name of Senior School receiving scripts** |       |
| **Name of person completing this form** |       |

Access arrangements were made for the following candidate(s):

|  |  |
| --- | --- |
| **Candidate Name** | **Brief note of access arrangement(s)** |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
|       |       |
| **Comments (if appropriate):**      |

**To be completed by the head of centre**

**Declaration**: I am satisfied that the information provided on this form is accurate and complete, and that the specified access arrangements have been implemented in accordance with JCQ guidelines.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |       | **Date** |       |
| **Signature** |       |

*a typed signature is acceptable*

One copy of this form should be submitted with the relevant examination scripts, and a second should be retained by the centre.