

### THIRD PARTY AUTHORISATION – CONSENT FORM

Dear Learner

Please complete the below information in order to provide consent for EAL to release a photocopy of your original certificate to the third party you have identified.

Please ensure that if you are handwriting this form that block capitals are used and the writing is legible.

		Office Use
<b>Name:</b>		
<b>Qualification:</b>		
<b>Certificate Number:</b>		
<b>Third Party Name:</b>		
<b>Third Party Address:</b>		
<b>Third Part Ref:</b>		
<b>Specify Photo ID:</b>		
Signature:		
<b>Date:</b>		

Please ensure you return this form with all information provided, and have provided the appropriate photo ID (eg valid passport / valid driving license).

Please ensure your information is correct. If we are unable to validate any of your details, this may result in a delay in us being able to action your request.

The information you provide in this form will be held for the purpose of processing your application for releasing a photocopy certificate to a third party. EAL retains records of achievements for 7 years and although we will respond to all requests as accurately as we can, any achievement obtained prior to this cannot be guaranteed to be confirmed.

If you have any queries, please do not hesitate to contact our Customer Experience Team: 01923 652400 or [customer.experience@eal.org.uk](mailto:customer.experience@eal.org.uk)