



Form G1 – Request of Script

With this form, you can request:

- A **photocopy of your script** – this does not affect your option to ask for a review of marking or clerical check (this service is available for AS/A Level only and for Edexcel board only at GCSE)
- Your **original script** – We advise **against** this option if you are considering challenging the marking, as once you receive your script, you are unable to request a clerical check or review of marking

Please see Post-Results Services Explained document for details of fees and deadlines. Please speak to a member of staff in the Exams Office, or a member of the Senior Leadership Team if you require any advice.

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|---|--|--|--|--|
| BOARD | | | | |
| SUBJECT | | | | |
| ELEMENT CODE | | | | |
| LEVEL | | | | |
| REQUEST* | COPY/ORIGINAL | COPY/ORIGINAL | COPY/ORIGINAL | COPY/ORIGINAL |
| FEE | | | | |
| Office use only: | | | | |
| Fee received/confirmed with form? | WP* / CASH / INT** | WP* / CASH / INT** | WP* / CASH / INT** | WP* / CASH / INT** |
| [WisePay* ref / HoD Signature**] | | | | |
| Date received by exams office | | | | |
| NOW DETACH AND PASS CARBON COPY TO STUDENT | | | | |
| Date processed online | | | | |
| Date script passed to HoD | | | | |
| Date script passed to student | | | | |
| HoD recommendation | No action <input type="checkbox"/> Clerical check <input type="checkbox"/> Marking review <input type="checkbox"/> | No action <input type="checkbox"/> Clerical check <input type="checkbox"/> Marking review <input type="checkbox"/> | No action <input type="checkbox"/> Clerical check <input type="checkbox"/> Marking review <input type="checkbox"/> | No action <input type="checkbox"/> Clerical check <input type="checkbox"/> Marking review <input type="checkbox"/> |
| Date recommendation passed to parent/student | | | | |

*Please delete as appropriate

All forms and payment must be handed in and checked by LISA THOROGOOD in the EXAMS OFFICE ONLY. Forms handed to other members of staff will NOT be processed. Forms will not be accepted unless submitted alongside valid payment. Cash or WisePay only (for WisePay, please supply payment reference number), cash will need to be exact monies please.

PLEASE RETAIN YOUR COPY FOR YOUR RECORDS

I give my consent to the Exams Officer at my School to request a copy of or my original paper. In giving consent for an original copy of a script, this means I cannot then request a clerical check or review of marking.

Candidate Name: **Candidate Number:**

Contact email: **Contact Phone Number:**

Candidate Signature: **Date:**



Form G2 – Request Clerical Check/Review of Marking

With this form, you can request:

- a **clerical check** (Service S1) – if you believe marks have been added up incorrectly on your paper. **Note: Your grade can go down as well as up**, so we advise you to only use this service if you are close to the next grade up. We strongly suggest that you review a copy of the paper prior to requesting this service, where available
- a **review of marking** (Service S2) – a second examiner will review the paper/recording again to identify genuine marking errors or unreasonable marking; this service includes a clerical check. **Note: Your grade can go down as well as up**, so we advise you to only use this service if you are close to the next grade up. We strongly suggest that you review a copy of the paper prior to requesting this service, where available
- a **priority review of marking** (SP2) – The same as a review of marking, but a priority review is a quicker service for students whose place at a university or other higher education institution depends on the outcome (this service is available for A Level only)

Please see *Post-Results Services Explained* document for details of fees and deadlines. Please speak to a member of staff in the Exams Office, or a member of the Senior Leadership Team if you require any advice.

| | | | | |
|---|--------------------|--------------------|--------------------|--------------------|
| BOARD | | | | |
| SUBJECT | | | | |
| ELEMENT CODE | | | | |
| LEVEL | | | | |
| SERVICE* | S1 / S2 / SP2 | S1 / S2 / SP2 | S1 / S2 / SP2 | S1 / S2 / SP2 |
| FEE | | | | |
| Have you already requested a copy of the paper? (HIGHLY RECOMMENDED) | Yes / No | Yes / No | Yes / No | Yes / No |
| Office use only: | | | | |
| Fee received/confirmed with form? | WP* / CASH / INT** | WP* / CASH / INT** | WP* / CASH / INT** | WP* / CASH / INT** |
| [WisePay* ref / HoD Signature**] | | | | |
| Date received by exams office | | | | |
| NOW DETACH AND PASS CARBON COPY TO STUDENT | | | | |
| Date processed online | | | | |
| Date outcome passed to parent/student | | | | |

*Please delete as appropriate

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PLEASE RETAIN YOUR COPY FOR YOUR RECORDS

I give my consent to the Exams Officer at my School to make an enquiry about the result of the exam/s listed above. In giving consent I understand that my grade could go up or down, or stay the same.

Candidate Name: **Candidate Number:**

Contact email: **Contact Phone Number:**

Candidate Signature: **Date:**