

CITB eCourses Parental consent form

Guidance and instructions for completing this form

1. Any candidate under the age of 16 wishing to take any CITB eCourses examination in a test centre, is required to have the consent of their parent or guardian before doing so.
2. The candidate is also required to be accompanied to their appointment at the test centre by an appropriate adult. An appropriate adult could be a parent, guardian, carer, teacher/tutor or employer.
3. Failure to comply with either or both points 1 or 2 above will result in the candidate being turned away from their test and the loss of their test fee.
4. Section 1 of this form is to be completed by the parent or guardian of the candidate **prior** to their appointment at the test centre and must be taken to the test centre. Only the original form is acceptable, we cannot accept faxed, scanned or photocopied documents.
5. Section 2 of this form is to be completed **at the test centre** by the appropriate adult accompanying the candidate.

Section 1: Parental consent for a person under the age of 16 to take a CITB eCourses exam.

To be completed by the parent/guardian of the person under the age of 16 who wishes to sit a CITB eCourses exam. Please complete all areas marked with an *. This form will not be accepted if any details requested are missing.

I (name)*..... (*parent/guardian – please indicate) hereby authorise CITB to register and hold details for my *son/daughter (please indicate):

BLOCK CAPITALS PLEASE

*Candidate forename

*Candidate surname

*Candidate date of birth

I understand that CITB needs to hold relevant data to enable candidates to take a eCourses examination . I understand that a photo of my child will be taken when attending for a test and this image will be held on record by CITB.

The test centres are operated by a specialist provider of such services independent of CITB.

*Signed

*Date

*Print name

Section 2: Record of the candidate being accompanied by an appropriate adult.

To be completed at the test centre by the appropriate adult accompanying the person under the age of 16 to their eCourses exam

BLOCK CAPITALS PLEASE

*Candidate forename

*Candidate surname

*Name of accompanying adult

*Signature of accompanying adult

*Relationship to candidate

*Date

*Test type

To be completed by the test administrator

Test centre number

Name of test administrator