



FORM V2

This form should be completed if an examination session is interrupted or disrupted and the exam could not be restarted. A candidate's entry remains valid for one-year from the original exam date.

Name:	
Address:	
Candidate Number (if known):	
Name of Person Entering Candidate:	
Reason for examination being interrupted or disrupted and not restarting:	
I have read the Reasonable Adjustments & Special Considerations Policy, Exam Protocol and can confirm that I understand the terms and consequences of submitting this form.	<input type="checkbox"/>

SIGNED	DATE

Please return to: Operations Director, 76 Church Road, Northwich, CW9 5PB