A LEVEL

Enquiries About Results (EAR)

APPLICATION FORM

Candidate Name	
Candidate Number	
Mobile Tel Number	
Private Email Address	

PRIORITY REVIEW OF MARKING		**DEADLINE: NOON 20th August 2026**	
I wish to apply for a Priority Review of Marking:			
Subject		Paper Number	
Subject		Paper Number	
Subject		Paper Number	
I understand that my grade may increase, remain the same or <u>decrease</u> as a result of this application			
		Total	£

PRIORITY ACCESS TO SCRIPTS		**DEADLINE: NOON 27th August 2026**	
I wish to apply for a Priority Access to Scripts:			
Subject		Paper Number	
Subject		Paper Number	
Subject		Paper Number	

REVIEW OF MARKING		**DEADLINE: NOON 24th September 2026**	
I wish to apply for a Review of Marking:			
Subject		Paper Number	
Subject		Paper Number	
Subject		Paper Number	
I understand that my grade may increase, remain the same or <u>decrease</u> as a result of this application			
		Total	£

ACCESS TO SCRIPTS		DEADLINE: NOON 24th September 2026	
I wish to apply for Access to Scripts:			
Subject		Paper Number	
Subject		Paper Number	
Subject		Paper Number	

CLERICAL RE-CHECK		DEADLINE: NOON 24th September 2026	
I wish to apply for a Clerical Re-Check:			
Subject		Paper Number	
Subject		Paper Number	
Subject		Paper Number	
I understand that my grade may increase, remain the same or <u>decrease</u> as a result of this application			
		Total	£

PAYMENT			
I confirm I have paid the following sum by bank transfer			£
CANDIDATE SIGNATURE (must be signed by the candidate)		DATE	

Office use only

Paid		Submitted		Result		Informed	