



**Certifying Statement Application Form**

Please read the guidelines to help with filling in the form and use **BLOCK CAPITALS** for the Personal and Delivery Details.

**Personal and Delivery Details**

|   |   |
|---|---|
| Current full name <i>including Mr, Mrs etc.</i> |   |
| Full name at time of exam                       |   |
| Date of birth                                   |   |
| Contact telephone number                        |   |
| Delivery phone number, <b>needed for DHL</b>    |   |
| Email address                                   |   |
| <b>Current address</b>                          | <b>Delivery address if different, e.g. a university</b> |
|   |   |

**Details of Exam Taken**

Search Criteria – Up to 4 search criteria can be specified if you are not sure about exactly where or when you took the exam, see guidelines for details. **It is imperative that the Qualification, Year, Month and Centre are filled in** otherwise the form will be returned unprocessed. If you do not know the year please consider your age at the time of the examination. An asterisk (\*) signifies a mandatory field.

|                                   | Search 1 | Search 2 | Search 3 | Search 4 |
|-----------------------------------|----------|----------|----------|----------|
| Qualification* e.g. PET, BEC, FCE |          |          |          |          |
| Year*                             |          |          |          |          |
| Month*                            |          |          |          |          |
| Centre number                     |          |          |          |          |
| Centre name*                      |          |          |          |          |
| Centre town                       |          |          |          |          |
| Centre country                    |          |          |          |          |
| Candidate number                  |          |          |          |          |

|                     |  |  |  |  |
|---------------------|--|--|--|--|
| For office use only |  |  |  |  |
|                     |  |  |  |  |

**Proof of Identity** – Must be provided if the statement is to be sent to you. Please tick one:

- Photocopy of birth certificate
- Photocopy of appropriate pages of your passport/ID Card
- Photocopy of driving licence

**Fees**

|   | Price        | Quantity | Total |
|---|--------------|----------|-------|
| <b>Certifying statements</b>                              |              |          |       |
| Search and first Certifying Statement                     | £25          | 1        | £25   |
| Additional copies   | £5 each      |          |       |
| Fast track service, within 7 working days, additional fee | £15 extra    |          |       |
| <b>Delivery options</b>                                   |              |          |       |
| UK - Special delivery                                     | £5 optional  |          |       |
| Overseas - DHL Delivery                                   | £19 optional |          |       |
| Total   |              |          |       |

**Payment**

Payment can be by: cheque, (made payable to UCLES from a UK bank) or bankers draft, credit card (Visa, Mastercard), Maestro, or via the Western Union. It is also possible to pay by Postal Order in the UK.

|                   |  |
|-------------------|--|
| Method of payment |  |
|-------------------|--|

If payment is by credit/debit card please fill in the following details.

|   |  |
|---|--|
| Credit card reference number  |  |
| Credit card expiry date   |  |
| 3-digit security code (printed in italics to the right of the signature strip on the reverse of the card) |  |
| Maestro issue number  |  |

**Checklist**

Please tick to check you have done everything required and have:

1. Completed all the items on the form.
2. Enclosed proof of identity, if required.
3. Calculated the fee.
4. Enclosed a cheque or bankers draft, if used for the payment.

**Signature**

|        |  |
|--------|--|
| Signed |  |
| Date   |  |

Please return to: University of Cambridge ESOL Examinations,  
Scheduled Processing,  
Past Records,  
1 Hills Road,  
CAMBRIDGE,  
CB1 2EU, UK

FAX: +44 (0)1223 553038  
Email: [ESOLPastrecords@cambridgeassessment.org.uk](mailto:ESOLPastrecords@cambridgeassessment.org.uk)