

# GCE RESULTS JUNE 2024

## Post Results Services & Candidate Consent Form

If your results are not as you expected and you wish to query them, please discuss this with your subject teacher or a member of the Sixth Form staff today. The procedure for Post Results Services is set out below.

### Enquiries about Results

**Priority Review of Marking (GCE only - where university place is dependent on outcome) Deadline: 10.00am Wednesday 21<sup>st</sup> August.**

**\*Review of Marking:** (ROM) original scripts are reviewed by an examiner to ensure correct marking procedures were followed. **Deadline: Mid-day Wednesday 25<sup>th</sup> September for completed forms (payment to be made through EBS Shop on the school website).**

\*Following a request for a review, there are three possible outcomes:

- Your original mark is lowered, so your final grade may be **lower** than your original grade
- Your original mark is confirmed as correct, and there is **no change** to your grade
- Your original mark is raised, so your final grade may be **higher** than the original grade

**IMPORTANT: seek advice from the Head of Department, subject teacher or Head of 6<sup>th</sup> Form before requesting a review of marking.**

If your teacher feels that your review request is justified, he/she should sign the consent form printed overleaf. If the form is not signed by a teacher, you will be asked to pay any fees before the review can be progressed. In order to proceed with any enquiry about results, you must also sign the consent form, to confirm that you understand the possible outcomes of an enquiry and give your consent to the enquiry being made. Subject teachers may also receive a copy of your returned script which they may wish to use for teaching purposes. If you consent to this, your name will be removed from the script before it is used. Remember - if you request your original script to be returned, a review is not possible.

### Access to Scripts

**Copy of Script:** it is possible to see a copy of your script if you are considering requesting a non-priority review of marking.

**Deadline: 10.00am Wednesday 4<sup>th</sup> September for completed forms (payment to be made through EBS Shop).**

**Return of Original Script:** you may request the return of your original script but please note that in this case a review of marking is not possible once the script has been released by the Exam Board.

**Deadline: Mid-day Wednesday 25<sup>th</sup> September for completed forms. (Payment to be made through EBS Shop on the school website).**

**All forms must be passed to the Examinations Officer in the main office for processing.**

<b>Priority Review</b>	<b>Per paper/unit</b>	Edexcel £62.83	AQA £59.01	OCR £77.27
<b>Copy of script</b>	<b>Per paper/unit</b>	Edexcel £10.00	AQA £10.00	OCR £10.00
<b>Review</b>	<b>Per paper/unit</b>	Edexcel £52.74	AQA £49.63	OCR £62.73
<b>Return of original script</b>	<b>Review not possible</b>	Edexcel £10.00 <b>Per script</b>	AQA £10.00 <b>Per script</b>	OCR £10.00 <b>Per script</b>
<b>Review + copy of reviewed script</b>	<b>Per paper/unit</b>	Edexcel £62.74	AQA £59.63	OCR £72.73

**GCE ENQUIRY ABOUT RESULTS - Priority Deadline 10.00am Wednesday 21<sup>st</sup> August**

**STANDARD DEADLINE: Mid-day Wednesday 25<sup>th</sup> September 2024**

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I give my consent to the Head of my Examination Centre to make an Enquiry about Results for the following exams. In giving consent, I understand that the final subject grade awarded to me may be lower than, higher than, or the same as the grade originally awarded for this subject.

AS/A2 Code:..... Exam Board.....

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Student Name:..... Candidate No:.....

Contact No:.....

Student Sig:.....

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Payment Receipt No:.....Amount £.....

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**\*PLEASE NOTE: PAYMENT AMOUNT ON PREVIOUS SHEET IS PER PAPER/SCRIPT\***  
**Please make payment through the school shop on the school website**

**PRIORITY?**  **Please tick**

Request for marked script requested?  **Please tick**

I consent to my returned script being used for teaching purposes.  **Please tick**

Script to be returned to: Teacher  Student  **Please tick**

Student Sig:.....

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I confirm that I support this Enquiry about Results and the fees incurred will be paid by the school.

Teacher's Name:.....

Teacher's Signature:.....

**GCE REQUEST FOR RETURN OF ORIGINAL SCRIPT – Deadline Mid-day Wednesday 25<sup>th</sup> September**

**I request a Return of Original Script for revision purposes for the following exams:**

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AS/A2 Code:..... Exam Board.....

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Script to be returned to: Teacher  Student  **Please tick**

Student Name:..... Candidate No:.....

Student Sig:.....

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**For Edexcel exams, it is possible for the teacher to view the script online. Please indicate below whether you agree to this.**

Script to be viewed online by Teacher  **Please tick**

I consent to my returned script being used for teaching purposes.  **Please tick**

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Student Signature:.....

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Payment Receipt No:.....Amount £.....

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**STANDARD DEADLINE: Mid-day Wednesday 25<sup>th</sup> September 2024**

**I request a Copy Script for:**

**Revision purposes**  **Please tick**

**Supporting a review of marking**  **Please tick (Deadline mid-day 4<sup>th</sup> September - Priority)**

**for the following exams:**

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AS/A2 Code:..... Exam Board.....

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Script to be returned to: Teacher  Student  **Please tick**

Student Name:..... Candidate No:.....

Student Sig:.....

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**For Edexcel exams, it is possible for the teacher to view the script online. Please indicate below whether you agree to this.**

Script to be viewed online by Teacher  **Please tick**

I consent to my returned script being used for teaching purposes.  **Please tick**

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Student Signature:.....

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Payment Receipt No:.....Amount £.....

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