# SQA Care Experienced Learner Replacement Certificate Form



Please refer to the <u>Guidance on requesting a replacement certificate for a care-experienced learner document</u> before completing this form.

Email your completed form to replacement.certificates@sqa.org.uk. Or by post to:

Centre Support, Scottish Qualifications Authority, The Optima Building, 58 Robertson Street, Glasgow, G2 8DQ

The form must be signed by a certified which is a professional person who can validate your care background. A full list of acceptable certifiers is contained within the <u>guidance document</u>.

Typed responses and signatures will be accepted.

#### Your current details

Candidate name	
Date of birth	
Scottish Candidate Number(s) if known	
Current address	
Postcode	

### Your previous details

Please ensure you include any previous names, starting with the name you had at the time you achieved your qualifications.

Previous name	Previous address	Scottish Candidate Number

## Delivery

In the first instance we will send your certificate to the home address we have on file. However, we can deliver your certificate to any address.

If you would like your certificate to be delivered to an address that we do not have stored for you such as a school, college, university, or employer, please supply the details.

Delivery address	
Postcode	

Digital version					
We can also email a digita If you would like a digital vermail address.				e tick this box, and supply your	
Email address					
Qualification details					
Course title (National 5, HNC etc.)	Year achieved	S	chool or college name	City or town of school or college	
Candidate declaration  I declare that the inform	ation supplied on	ı this	Tick Box		
application is correct.					
Candidate name					
Candidate signature					
Date					
Additional Information Please use this space to a	dd any further infor	mation tha	at may be relevant to your ap	plication.	

## **Certifier declaration**

I declare that the person making this order is care experienced, the information on this application is correct and I have seen documentation to support this.	Tick Box
Name	
Signature	
Relationship to learner	
Date	