



Acting on someone else's behalf

We know that not everybody is able to contact SQA to make a complaint and they might need someone to do it for them.

If you are acting on behalf of someone else who is unable to provide written authorisation for you to act on their behalf, due to a learning or physical disability or a health condition, please complete the form below.

Alternatively, if you have official authority to act on behalf of an individual, such as a Power of Attorney or a Guardianship order, you can provide evidence of this.

1. Your Details:

First Name:

Last Name:

Address:

Contact Telephone No:

Email:

2. Candidate details:

Details of the individual you will be acting on behalf of.

First Name:

Last Name:

Date of birth:

Scottish Candidate Number (SCN):

Address:

3. Duration of authority

This authorisation will remain in place until SQA has concluded the complaint.

If the individual you are acting on behalf of states their wish to remove your authority, you must inform complaints@sqa.org.uk

4. Declaration

I confirm that I act on behalf of the candidate named in section 1 above and that they have given authorisation for this but are unable to provide this in writing due to a learning or physical disability or a health condition.

I understand that SQA may request additional information to confirm my identity and/or relationship to the candidate.

Signed:

Date:

Please print your full name

Please be aware that you may be committing a criminal offence if you make false or misleading statements to obtain or attempt to obtain the personal data of another individual.

Please submit your form by

Post to: The Complaints Team
5th floor
Scottish Qualifications Authority
The Optima Building
58 Robertson Street
Glasgow
G2 8DQ

Email to: complaints@sqa.org.uk