



Authorisation for someone to act on your behalf.

We know that you may not be comfortable or confident about making a complaint and you may prefer to have someone else do it for you.

Before we can discuss your complaint with someone else, we need to know that you are happy for them to contact SQA on your behalf.

If you would like to authorise someone else to contact SQA and act on your behalf, please complete the form below.

1. Your Details:

First Name:

Last Name:

Date of Birth:

Scottish Candidate Number (SCN):

Address:

Contact Telephone No:

Email:

2. Representative details:

Please provide the details of the person that you would like to contact SQA on your behalf.

First Name:

Last Name:

Address:

Contact Telephone No:

Email:

3. Duration

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

You can withdraw your authorisation at any time. To do so please contact the Complaints Team at complaints@sqa.org.uk

4. Authorisation:

I authorise the person named in section 2 to contact SQA on my behalf. I understand that this may result in SQA releasing information about me, including details of my qualifications, to my representative.

I understand that SQA may request additional information to confirm my and/or my representative's identity.

Signed:

Date:

Please print your full name

Please be aware 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