

Enquiry About Result (EAR) request form (Form EAR1)



Please consult the NEBOSH "Enquiries About Results (EARs) and Appeals policy and procedures" document before completing this form. Use one form per candidate per qualification per enquiry type - all sections of the form must be completed.

PLEASE WRITE CLEARLY IN BLOCK CAPITALS

Please tick one of the two boxes below to confirm who is applying for the EAR:

- The candidate applying for an EAR on the candidate's examination results.
- The candidate's accredited course provider applying for an EAR on behalf of the candidate. If this option is ticked please also attach the candidate's consent form (Form EAR2) to this application. Applications received without Form EAR2 attached **will not be processed** and will be returned to sender.

1. Accredited course provider (ACP) details

Name of ACP:

ACP number (if known):

Examination venue (if applicable):

2. Enquiry service required (please tick appropriate box)

- MCQP – for multiple-choice question papers only
- Type 1 EAR – clerical check only
- Type 2 EAR – clerical check and re-mark of script

3. NEBOSH student number

NEBOSH student number:

4. Candidate details - as they appear on the unit result notification and status report (URN)

Title (eg Mr, Mrs) First (given) name/s Surname (family name)

Date of birth / /
D D M M Y Y

Please enter your address below; if your address is different to that appearing on your URN please confirm one of the following:

- This is my new contact address; please change NEBOSH records;
- This is my contact address for EAR purposes only; please do not amend NEBOSH records.

House/flat number (or name) Building name/number (where applicable)

Street

District (where applicable) Town/city

County/state Country

Postal /zip code

Daytime telephone number

Email address. **Important note** - if you are applying for an EAR for any unit (including the practical unit) of a qualification which is assessed by a multiple-choice question paper, your email address is mandatory; NEBOSH will only correspond with you by this method for this qualification.

5. Course/examination details

Title of NEBOSH qualification (eg National General Certificate In Occupational Health and Safety)

Qualification unit name/s

Unit code/s (eg NGC1)

Please list all units you wish to enquire on. Important note - if you are requesting different EAR services for different units you will need to submit a separate form per enquiry type.

Date of examination/s (including Certificate practical units) or assessment task submission (eg Unit D).

 / /

D D M M Y Y

Date of the relevant unit result notification and status report (URN).

 / /

D D M M Y Y

6. Reason/s for requesting EAR

7. Declaration

NEBOSH will process your data in accordance with the principles of the UK Data Protection Act (1998).

I confirm that by completing and submitting this form:

- I give consent to the processing of this data;
- I understand that the final mark and (where applicable) grade awarded to me as a result of this EAR may be **higher than, lower than or the same as** the mark and (where applicable) grade that was originally awarded for this assessment;
- I have read the NEBOSH *"Enquiries About Results (EARs) and Appeals policy and procedures"* document and understand it;
- I have read and understood the 'Application notes/terms and conditions' on page 3 of this form;
- I have supplied information which is accurate to the best of my knowledge.

Candidate or accredited course provider signature

Date

All EAR Type 2 applications will be acknowledged within 10 working days. If an acknowledgement is not received within this period the accredited course provider and/or candidate should contact NEBOSH immediately.

8. Payment details

For current fees applicable to all enquiry types and payment details please see the current NEBOSH fees schedule available on the NEBOSH website (www.nebosh.org.uk). Debit/credit card payments may also be made by calling Customer Services on 0116 263 4700. For security reasons, please do **not** enclose cash. If you are paying by debit or credit card, please note that this section of the form will be destroyed once a successful payment has been taken. Your card receipt will be sent to you with the acknowledgement letter (if a Type 2 EAR) or with the EAR outcome paperwork (if a Type 1 or MCQP EAR).

Card to be debited (please tick)

- Mastercard
- Visa
- Delta
- Maestro
- Solo

Payment amount £

Cardholder's name

Card number

Security code

Issue number (*Maestro/solo only*)

Valid from / / Expires end / /

Cardholder's signature _____ Date _____

Application notes / terms and conditions

1. All sections of this form must be completed in full.
2. Use one form only per candidate, per qualification and per enquiry service. This form may be photocopied if more applications are needed.
3. Incomplete forms and/or forms received without full payment **will not be accepted** and will be returned to the applicant. Please note that NEBOSH will not issue invoices for EAR fees.
4. EAR requests submitted by an ACP must be accompanied by a NEBOSH EAR Candidate Consent form (Form EAR2); if a consent form is not attached the application **will not be accepted** and will be returned to the applicant.
5. Completed forms should be sent to Enquiries About Results, NEBOSH, Dominus Way, Meridian Business Park, Leicester, LE19 1QW
6. Please allow the following time scales for the processing of the Enquiry About Result:
 - MCQP EAR – 15 working days from receipt of application.
 - Type 1 EAR – 10 working days from receipt of application.
 - Type 2 EAR – 40 working days from EAR closing date.