CONFIDENTIAL

**Exam venue staff application form**

Personal Details

|  |  |  |  |
| --- | --- | --- | --- |
| **Surname** | **Title (circle as appropriate)** | **Nationality** | **Date of birth** |
|  | Miss Ms Mrs Mr Dr |  | Day/Month/Year |
| **First name(s)** | **Gender** | **First language** | **Date of application** |
|  |  |  | Day/Month/Year |
| **Contact details** | **Phone number/s** | **Address** | **e-mail address** |
|  |  |  |  |

Employment / study history

|  |  |  |  |
| --- | --- | --- | --- |
| **Date (from/to)** | **Employer** | **Full time/part time** | **Duties** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Experience as an invigilator for recognised exams (national and international)

|  |  |  |
| --- | --- | --- |
| **Date (from/to)** | **Subject/Sheme** | **Examining/Validating body** |
|  |  |  |
|  |  |  |
|  |  |  |

Please summarise, why you would like to become an invigilator:

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Signature: