**ORDER FORM for Official Confirmation of Results**

You can complete the form electronically and save on your pc. However, we will need your signature added manually before submission. Please complete **ALL** sections in **BLOCK CAPITALS.**

|  |
| --- |
| **Personal information** |

Please complete the following details. Please note we require the full name you registered under while studying at the University. If you graduated prior to March 2013, all documentation produced will refer to The College of Law rather than The University of Law.

|  |  |
| --- | --- |
| Last Name: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Forename(s): |  | Title: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date of birth (dd/mm/yyyy): |  | / |  | / |  |

Address to which the document should be sent (including postcode or PO Box as applicable):

|  |
| --- |
|  |

Contact Details for any queries:

|  |  |  |  |
| --- | --- | --- | --- |
| Tel: |  | Email: |  |

|  |
| --- |
| **Programme information** |

**Course(s):** Please tick all courses that you wish a document produced for

|  |  |  |  |
| --- | --- | --- | --- |
|  | Bar Professional Training Course |  | Graduate Diploma in Law |
|  | (incl. Bar Vocational Course) |  | (incl. Postgraduate Diploma in Law and Common Professional Examination) |
|  | Legal Practice Course (incl. Postgraduate Diploma in Legal Practice and Law Society Finals) |  | Business School degree / Master’s courses |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Bachelor of Laws (Post/Under-graduate) |  | Master of Laws / other Master’s course |

|  |  |
| --- | --- |
|  | Other (please state full name of the course) |
|  |  |

**Centre/campus of study:**

|  |  |
| --- | --- |
|  |  |

**Attendance:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Academic year(s) of course(s): |  | to |  | yyyy to yyyy |

|  |  |  |
| --- | --- | --- |
| Year(s) of award(s): |  |  |

|  |
| --- |
| **Documents Requested** |

Please indicate the number of copies required and the sub-total. Note that if you require documents for two different courses, you will be requesting 2 against “1st copy”.

|  |  |  |  |
| --- | --- | --- | --- |
| **Document** | **Price per item** | **No. Required** | **Subtotal** |
| Confirmation of Results – 1st Copy | £25.00 |  | £ |
| Confirmation of Results – additional copies | £15.00 |  | £ |

**ORDER FORM for Official Confirmation of Results**

|  |
| --- |
| Please provide full details of any particular requirements |

Please attach additional sheets if necessary

|  |
| --- |
| **Payment Details** |

Your order will not be processed without receipt of your credit/debit card details or a cheque for the appropriate amount.

I would like to pay by:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Credit/debit card | Please charge £ |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of Card: |  | Visa Card |  | Mastercard |  | Switch/Maestro |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Card number: |  |  |  |  |  |  |  |

(Please enter four digits in each box)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Expiry Date: |  | / |  | mm / yy |

|  |  |  |
| --- | --- | --- |
| Postcode associated with card: |  |  |

|  |  |
| --- | --- |
| Cardholder (as shown on the card) |  |

You will **also need to provide the 3 digit security number from the back of your card**. You can either email [former-records@law.ac.uk](mailto:former-records@law.ac.uk) with the code (**do not send it in the same email as the order form**), referring to this order, or call 01483 216 831 with the information.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  | Cheque | for £ |  |

Cheques should be made payable to “The University of Law Ltd” and posted to the address below.

I confirm that the details above are correct and, if paying by Credit/Debit card, I authorise the payment of the appropriate fee for the service requested.

Signature: Date:

Signature of Cardholder (if different):

**If you are a third party requesting this information on behalf of a former student you must enclose a signed letter of authority from the individual in question.**

|  |
| --- |
| **Please complete the form and return it via either of the following (email is preferred):**  **Post:** Former Records Department **Email:** [former-records@law.ac.uk](mailto:former-records@law.ac.uk)  The University of Law  2 Bunhill Row  London  EC1Y 8HQ |