

## CITB Under 16s Tests and Examinations Parental consent form

### Guidance and instructions for completing this form

1. Any candidate under the age of 16 wishing to take the any CITB Tests or Examinations is required to have the consent of their parent or guardian before doing so.
2. The candidate is also required to be accompanied to their appointment at the Test Centre by an appropriate adult. An appropriate adult could be a parent, guardian, carer, teacher/tutor or employer.
3. Failure to comply with either or both points 1 or 2 above will result in the candidate being turned away from their Test or Examination appointment.
4. Section 1 of this form is to be completed by the parent or guardian of the candidate **prior** to their appointment at the Test Centre, and must be taken to the Test Centre. Only the original form is acceptable, we cannot accept faxed, scanned or photocopied documents.
5. Section 2 of this form is to be completed at the Test Centre by the appropriate adult accompanying the candidate.

### Section 1: Parental consent for a person under the age of 16 to take a CITB test/exam

**To be completed by the parent/guardian of the person under the age of 16 who wishes to sit a CITB test/exam. Please complete all areas marked with an \*. This form will not be accepted if any details requested are missing.**

I (name)\*.....  
(\*parent/guardian – please indicate) hereby authorise CITB to register and hold details for my  
\*dependant (please indicate):

#### **BLOCK CAPITALS PLEASE**

\*Candidate forename .....

\*Candidate surname .....

\*Candidate date of birth .....

**I understand that CITB needs to hold relevant data to enable candidates to take relevant CITB tests and examinations. I understand that a photo of my child will be taken when attending for their appointment and this image will be held on record by CITB. The Test Centres are operated by a specialist provider of such services independent of CITB.**

\*Signed .....\*Date .....

\*Print name .....

**Section 2: Record of the candidate being accompanied by an appropriate adult.**

**To be completed at the Test Centre by the appropriate adult accompanying the person under the age of 16 to their appointment.**

**BLOCK CAPITALS PLEASE**

\*Candidate forename .....

\*Candidate surname .....

\*Name of accompanying adult .....

\*Signature of accompanying adult .....

\*Relationship to candidate .....

\*Date .....

\*Test/Exam type .....

**To be completed by the test administrator**

Test Centre number .....

Name of Test Administrator .....