Reference Number:

Third Party Consent Form

Consent for a third party to act on a student's behalf in connection with the following procedures:				
Academic Appeals	Disciplinary Procedure			
 Student Complaints Procedure Academic Misconduct Procedure 	Fitness to Practise Procedure			
Section A: Details of the student authorising a third party to act on their behalf				
Name:				
Location:				
Programme:				
Student No.:				
Tel. No.:				
Email:				
Section B: Details of the person authorised to act on behalf of the student				
Name:				
Role/Relationship to the student:				
Address:				
Tel. No.:				
Email:				
Section C: Special Instructions/conditions				
Section D: Declaration by the Student				
 I confirm that I am the person detailed above in Section A. I confirm that the authorised person in Section B above is happy to ac I confirm that I will pass all relevant information relating to the proced I confirm that the authorised person has not been suspended or excluand is not in debt to the College. I understand that I can withdraw this consent by notifying The Complations. 	dure(s) to the authorised person. Ided from the College for any reason			
Signed:	Date:			



Document control box				
Title	Third Party Consent Form (Completed by Student)			
Date approved	February 2020	Implementation date	February 2020	
Next review date	Jan 2022			
Version	Feb 2020	Supersedes version	N/A	
Approving body		Governors		
Quality Code co				
Member of staff responsible		COO (Complaints Officer)		