



Application for Registration as an ECS Authorised Invigilator

Details of the person seeking registration as an ECS Authorised Invigilator:	
Surname:	
Forename(s):	
N.I. Number:	
Date of Birth:	
Name of Employing Organisation:	
Address of Employing Organisation:	
Postcode:	
Please sign below to confirm you have received the necessary training to become an ECS Authorised Invigilator and that you are fully aware of the responsibilities this entails. You will also need to attach a passport photograph with your name on the reverse to enable production of your Identification Card.	
Signature:	

Please return to: The HEA, Highdown House, Littlehampton Road, Ferring, West Sussex, BN12 6PG

Email: jibtest@thehea.org.uk

Please do not forget the photograph (with your name on the reverse)