



## CERTIFICATION REQUEST FOR DEFERRED CANDIDATES FOR LEVELS 4, 5 AND 6 FORM

Please use this form to request certification for a candidate who has been 'Deferred' for qualifications at level 4-6

Candidate name: \_\_\_\_\_ Candidate no: \_\_\_\_\_ Date course ended: \_\_\_\_\_  
 Qualification: \_\_\_\_\_ Centre name: \_\_\_\_\_ Group no. \_\_\_\_\_

Reason candidate was Deferred:

Tick those boxes which are applicable:

I confirm that this candidate has now completed all the units, learning outcomes and assessment criteria (without contra-indications) and met all the qualification requirements.

I confirm that this candidate has now met the work placement requirement (where applicable) of ..... hours client/supervisee hours.

I confirm that I (name) ..... was the approved course tutor for this candidate and am therefore authorised to sign off the internal assessment of this candidate.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For internal use only:**

External assessment is Proficient:

Date certificate issued: \_\_\_\_\_

Please e-mail this form to [tberry@cpcab.co.uk](mailto:tberry@cpcab.co.uk) or post to:  
 CPCAB, PO Box 1768, Glastonbury, Somerset, BA6 8YP

**Reminder:** If a candidate is likely to exceed the acceptable one year extension for client hours, then the core tutor must ask permission for a further extension in writing from CPCAB before the twelfth month has expired.