

# Authorization form for Collection of IELTS TRF

|   |  |
|---|--|
| Candidate Name                            |  |
| Test Date                                 |  |
| IELTS Candidate Number                    |  |
| Identity Number as per IELTS registration |  |
| Mobile Number                             |  |

**Candidate Signature:**

**Date:**

Name of organisation authorised for collection:

|                      |  |
|----------------------|--|
| Name of organisation |  |
| Office address       |  |
| Contact Number       |  |
| Email                |  |

***For Authorised Company Use – Confirmation of Details recorded above***

- All signatures verified against ID Yes  No
- Passport copy of the Candidate Yes  No
- Office ID of the authorised person from agent Yes  No

**Authorised Company Signature with Official Stamp:**

**Date:**

***For British Council Use – Confirmation of Details recorded above***

**CONFIRMATION of HANDOVER of TRF to AUTHORISED Company or Courier Agent**

**Authorised Person/company’s Signature:**

**Date:**

**British Council CS staff’s name:**

**Date:**