PSL/55 ISSUE 7 dated 1st April 2018

EXTENSION OF LATEST RETEST DATE FOR FAILED PCN EXAMINATIONS

INTRODUCTION - FAILED EXAMINATION RETESTS

Ref PCN GEN Re-examination

A candidate who fails in an examination part (general, specific or practical), may be re-examined a maximum of two times in order to achieve a pass grade of 70%, provided the re-examination takes place not sooner than one month, unless further training acceptable to BINDT (see PCN GEN 7.2) is satisfactorily completed, nor later than 1 year after the original examination.

A candidate who fails all permitted re-examinations shall apply for and the initial examination according to the procedure established for new candidates.

In extenuating circumstances, PCN may grant an extension of up to six months to the latest retest date given on the PCN examination results notice. This document sets out the procedure for making applications for such extension.

NOTES. Please read these notes carefully before completing the application form attached.

1. In order to obtain this dispensation you must submit a separate application (form attached) in respect of each examination retest for which deferment is sought, together with the current fee for each application (details of charges are given in document PSL/35). There will be an administrative charge for rejected applications, please refer to PSL-35.

2. The fees charged regarding deferred retest applications are in respect of increased administration involved at PCN Central Records Office and are NOT refundable under ANY circumstances. Additionally, the normal examination fee must still be paid to the AQB. It should be noted that dispensation for deferred retest is not automatically given. The application form and fee must be sent DIRECTLY to PCN at Midsummer House, Riverside Way, Bedford Road, Northampton, NN1 5NX, NOT directed through the AQB.

3. Applications must be received at the PCN Central Records Office at least four weeks prior to the latest retest date stated on the examination results notice (this is usually 12 calendar months from the date of the initial examination).

4. Applications for extension to latest retest date will NOT be considered after the latest retest date given on the result notice except in extreme extenuating circumstances - in which case the application must be considered by a PCN Appeals Panel.

5. Any extension of the latest retest date is a PCN concession which may be refused and, in the event that no extension is granted, applicants who have not passed the examination retest by the latest date given on their examination result notice will be considered 'initial candidates' for certification in that sector, method and level.
PSL/55 - APPLICATION FOR EXTENSION OF LATEST RETEST DATE

This application for extension of latest retest date is to be submitted to the PCN Central Records Office at Midsummer House, Riverside Way, Bedford Road, Northampton NN1 5NX or by email pcn@bindt.org at least four weeks prior to the latest retest date given on the initial examination results notice (which is normally 12 calendar months from the date of the initial examination). Applications received AFTER the normal latest retest date will NOT be accepted.

Authorised Qualifying Bodies are NOT permitted to accept retest examination bookings after the normal latest retest date unless a letter of dispensation, granted by PCN Central Records Office, is produced at the time of booking.

APPLICANT'S PERSONAL DETAILS:

1. FULL NAME: __________________________________________________________

2. HOME ADDRESS: ________________________________________________________
   ________________________________________________________________________
   ________________________________________________________________________
   POST CODE: ___________ TELEPHONE: ________________ FAX: _______________

3. EMAIL ADDRESS: ________________________________________________________

4. PCN NUMBER (if known) ________________________________________________

5. PLEASE EXPLAIN WHY AN EXTENSION TO THE LATEST RETEST DATE IS REQUESTED (use separate sheet if necessary):
   ________________________________________________________________________
   ________________________________________________________________________
   ________________________________________________________________________
   ________________________________________________________________________

EXAMINATION DETAILS:

6. DATE OF FAILED INITIAL EXAMINATION: _________________________________

7. TEST CENTRE CONCERNED: ____________________________________________

8. EXAMINATION RESULTS NOTICE NUMBER: _______________________________

N.B. This can be found on the third line down on your results notice.
EMPLOYER'S DETAILS:

9. Please give the name of your supervisor or manager who may be contacted in connection with this application:

NAME: ___________________________ POSITION: ___________________________

COMPANY: ___________________________

ADDRESS: ___________________________ POST CODE: ____________

TELEPHONE: ___________________________ FAX: ___________________________

APPLICANT'S DECLARATION:

I understand that any extension of the latest retest date given in the relevant PCN requirements is a concession which may be refused and, in the event that no extension is granted, and if I have not passed the examination retest by the latest date given on the examination results notice, I will be considered an 'initial candidate' for certification in that sector, method and level.

The extension of latest retest date application fee at the current rate (see PSL/35) is enclosed herewith. I understand that this is not refundable under any circumstances.

Note: BINDT will store and use the information given on this form only for the purpose for which it has been provided. Your personal details and any other data you provide to BINDT will not be passed on to a third-party without your permission.

BINDT would like to contact you from time to time to let you know about its other services that may be of interest, such as special offers and discounts, events and new products. If you are happy to be contacted by BINDT, please indicate by ticking the box below:

I am happy for BINDT to contact me with information that may be of interest [ ]

You can subscribe or unsubscribe at any time, simply let us know.

SIGNATURE OF APPLICANT: ___________________________ DATE: _________________

This completed application should be forwarded to the PCN Central Records Office, Midsummer House, Riverside Way, Bedford Road, Northampton, NN1 5NX, United Kingdom (EMAIL: pcn@bindt.org) together with a copy of any PCN examination result notice pertaining to this application.

__________________________________________
__________________________________________
__________________________________________
__________________________________________

FOR PCN USE

DATE RECEIVED: __________ APPLICATION No: ___________________________

INVOICE/FEE INFORMATION: ___________________________

EXTENSION GRANTED: __________ NEW LATEST RETEST DATE: _________________

SIGNATURE: ___________________________ DATE: _________________

NAME: ___________________________ POSITION: ___________________________

REMARKS: ___________________________

__________________________________________
__________________________________________
__________________________________________
__________________________________________

ACTION COMPLETED DATE: ________________ INITIALS: __________________

REMARKS: ___________________________
PAYMENT

Are you VAT registered?
Please provide VAT Number.

Payment type if not paying by card (please tick & complete as appropriate)

<table>
<thead>
<tr>
<th>Cheque Enclosed?</th>
<th>Bank Transfer (BACS)</th>
<th>Purchase Order Number</th>
</tr>
</thead>
</table>

Credit/Debit Card (provide details below)

Please tick the appropriate boxes:

For payment by credit card (tick relevant box):
<table>
<thead>
<tr>
<th>Visa</th>
<th>MasterCard</th>
<th>Amex</th>
<th>Switch</th>
</tr>
</thead>
</table>

Corporate/ company card

Personal Card

Name as shown on the card:

Card Number

Signature of above named individual:

Security code:
(Last 3 digits on the security strip on reverse of the card)

Card valid from:

Card expiry:

Billing address:
(Address the invoice will be sent to, if Corporate card then address of company and name of whom the invoice should be sent to)

Please debit the above credit/debit card for the amount shown (applicants must enter the correct amount, which can be ascertained from document PSL/35):

£  :  (including VAT)

There will be an administrative charge for rejected applications, please refer to PSL-35.
PSL/55 ANNEX A - STANDARD LETTERS IN CONNECTION WITH EXTENSIONS TO LATEST RETEST DATE

1. APPLICATION APPROVED

Our ref: 241106/PSL55

NAME & ADDRESS

EXTENSION OF LATEST DATE FOR PCN EXAMINATION RETEST

Thank you for your completed application form (PSL/55) requesting an extension to the latest date for failed PCN examination retest.

An extension has been granted and you are required to apply to a PCN Authorised Qualifying Body for examination retest to take place on or before the date given below. No further extension will be allowed.

NEW LATEST RETEST DATE: ______________________________________________

FOR SECTOR: ____________ METHOD: ________________ LEVEL: __________

You must now make a written application for retest, supported by a copy of this letter, to an appropriate PCN AQB not less than 21 days prior to the above date.

Yours faithfully,

2. APPLICATION NOT APPROVED

Our ref: 241106/PSL55

NAME & ADDRESS

EXTENSION OF LATEST DATE FOR PCN EXAMINATION RETEST

Thank you for your completed application form (PSL/55) requesting an extension to the latest date for failed PCN examination retest.

Your application has not been approved and you should make arrangements to take your retest examination before the date given on the initial examination result notice. Failing this, you will be considered an initial candidate for PCN certification in the sector, method and level concerned.

Yours faithfully,