



Application to sit an examination for the Level 2 Certificate in Optical Customer Services (Spectacles)

Not to be used for any other examinations

SURNAME.....Mr, Mrs, Miss or Ms)

FORENAMES

WORK TELEPHONE NO.....MOBILE NO (Essential for online candidates).....

NATIONALITY..... DATE OF BIRTH.....

ADDRESS to which examination correspondence should be sent

.....
.....

Returning candidates on
Date of last attempt:

Candidate no (if known)

E -MAIL ADDRESS.....

I wish to sit /re-sit for the following units of the Level 2 Certificate in Optical Customer Services (Spectacles) on 11 June 2012 at 2.00pm by the means indicated. (Tick box A or B plus all of the units that you wish to take)

- | | | | |
|--|--------------------------|---|--------------------------|
| A. Online examination at place of Work | <input type="checkbox"/> | B. Written Examination | <input type="checkbox"/> |
| All | <input type="checkbox"/> | Unit 3 – The eye and ametropia | <input type="checkbox"/> |
| Unit 1 – Responsibilities in optical practice | <input type="checkbox"/> | Unit 4 – Supporting the provision of spectacle lenses | <input type="checkbox"/> |
| Unit 2 – Communication in optical customer service | <input type="checkbox"/> | Unit 5 – Supporting the provision of spectacle frames | <input type="checkbox"/> |

Please indicate your preferred venue for written examination below:

- | | | | | | | | |
|---------|--------------------------|----------|--------------------------|---------|--------------------------|--------------------|--------------------------|
| London | <input type="checkbox"/> | Belfast | <input type="checkbox"/> | Glasgow | <input type="checkbox"/> | British Council | <input type="checkbox"/> |
| Cardiff | <input type="checkbox"/> | Bradford | <input type="checkbox"/> | | | (Specify Location) | |

If you have selected Bradford or Glasgow, please indicate your secondary choice for use if there is insufficient demand to allow you your first choice

- | | | | | | |
|--------|--------------------------|---------|--------------------------|---------|--------------------------|
| London | <input type="checkbox"/> | Cardiff | <input type="checkbox"/> | Belfast | <input type="checkbox"/> |
|--------|--------------------------|---------|--------------------------|---------|--------------------------|

Online examination in my place of work. Please give supervisor details below. (Block capitals please)
(Must be an FBDO, MCOptom or equivalent)

Surname	Forename
Role in Company	Professional Qualification
GOC Registration or equivalent		

I attach a request for reasonable adjustment and the detailed justification for it

I certify that I have read and understood the WCSM's Examination Handbook & Regulations and Customer Service Statement. I understand that if I am opting to take the examination online at my place of work, an external verifier might conduct an unannounced audit whilst the exam is in progress.

Signed.....Date.....

Once completed, this form should be returned to the address below. If payment for the exam was not made at the time of Enrolment it should be accompanied by a cheque for the appropriate fee made payable to **'The WCSM'**
The Administrator, WCSM, Apothecaries' Hall, Black Friars Lane, London EC4V 6EL / administrator@spectaclemakers.com
Form continues overleaf.

APPLICATION FORM (CONTINUED)

Level 2 Certificate in Optical Customer Services (Spectacles) Examination timings & fees

Candidates applying for the first time are expected to enter all units. For those candidates who are taking the entire examination, the fee is £250.00. Resit candidates taking any combination of units will commence at 2.00pm.

Unit	Start Time	Time Allowed	Resit fees per unit
Unit 1	2.00pm	30 minutes per unit up to a maximum of 2 hours	£75.00 per unit
Unit 2	2.00pm		
Unit 3	2.00pm		
Unit 4	2.00pm		
Unit 5	2.00pm		

ETHNIC GROUPINGS

(Taken from the Government statistical Services List)

Indicator Number	Ethnic Group	Notes
10	White, UK Heritage	We are required by Statutory Obligation to seek this information. Please indicate by circling the appropriate Indicator Number.
11	White, European	
12	White, Other (Known)	
19	White, Type Not Known	
20	Black, Caribbean Heritage	
21	Black, African Heritage	
22	Black, Other	
30	Indian	
40	Pakistani	
50	Bangladeshi	
60	Chinese	
90	Other (Known)	
98	Student Not Prepared to Say	

Venue Addresses

London	Apothecaries' Hall, Black Friars Lane, London EC4V 6EL or City & Islington College, Goswell Road, London EC1V 7DD
Bradford	Bradford College tbc
Cardiff	UWIC, Cyncoed Campus, CF23 6XD
Glasgow	Caledonian University, 70 Cowcadden Road, G4 0BA
Belfast	University of Ulster, Jordanstown Campus, Shore Road, Newtonabbey, Co Antrim BT37 0QB

Maps and further detail will be provided with final instructions

Application forms should be returned as soon as practicable and no later than **Friday 6 April 2012**. They will be acknowledged within two working days of receipt. Applications received after this date **may not be accepted** due to space limitations at exam venues and will incur an additional administrative charge of £75.00.