

CONFIDENTIAL

Notification of suspected centre staff malpractice

This form is to be used by the Head of Centre to report an instance of suspected centre staff malpractice to us **before** an investigation starts.

Read section 5.6 of the Cambridge Handbook before you complete this form.

The Head of Centre must complete each field in this form and make sure the information is accurate before signing and sending it to info@cambridgeinternational.org. Do not send this form back in the script packet or with the coursework sample.

Centre number	Centre name								
Exam series									
Syllabus code		Compon	ent code						
Date and time of ind (DD/MM/YY HH:MM)	cident				·				
Date and time incid (DD/MM/YY HH:MM)	ent reported to Head of C	Centre							
Name of centre staff	Role at centre								
Tell us about the suspected malpractice including how it was discovered, when, and who by.									

evidence yo	ou will gather. Th	is might inclu		m the Head of C	actice. Please incl entre or teachers/ ples <i>)</i> .	
			- Cambriago Han			
	f Centre must sign	to confirm they	/ have completed a	and understood th	nis form and they ha	ave checked to
Signed (He	ead of Centre)			Date (DD/MM/YY)		
Name						
If you subn	nit this form electro	onically, tick the	check box as an	alternative to sign	ing the form.	
Returning t	his form					
Return this f	orm to info@camb	oridgeinternatio	nal.org. Include yo	our centre number	and 'Exam Day: F	orm 9a Notification
					e form for your own	

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