

This pdf form can be completed electronically (requires Acrobat Reader 7+), simply complete all the required fields then **'Save as...'** using your centre name or number as the filename then email the pdf back to OCR as an attachment to **eoio@ocr.org.uk**

Alternatively you can print this and fax to **024 76 851604** or you can return the form to **EOI, Sales and Marketing Division, OCR, Westwood Way, Coventry, CV4 8JQ.**

# Expression of interest

Centre name \_\_\_\_\_

Centre number \_\_\_\_\_

Please complete the details in the boxes below.

Subject	Qualifications and Level	Current provider	Estimated candidate numbers*	Start teaching date	First entry	Additional notes

\* Don't forget that your Exams Officer will also need to make estimated entries and final entries for these qualifications.

Do you intend to attend OCR Training?    Yes     No

If so, please specify subject and qualifications

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The information supplied on this form will be retained by OCR on a database. The information may also be used to contact you by letter, fax, telephone or email with details of qualifications which may be of interest to you. If you do not wish to be contacted please email us at **eoio@ocr.org.uk** to let us know.

The information that you provide will be used to ensure that we have appropriate support in place.

Contact name \_\_\_\_\_

Job title \_\_\_\_\_

Email address \_\_\_\_\_

Contact telephone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

OCR Representative name \_\_\_\_\_