



STAGE 2: INDEPENDENT REVIEW APPLICATION FORM

This form must be fully completed to be accepted

Surname:	First name(s):	
Postal Address:		
Email address:	Telephone Number:	
Qualification:	Candidate No.:	
Language / Language Combination:		
Pathway (DPSI only):		
Signature:	Date:	

Typing your name above will be taken as being as binding as your signature

INDEPENDENT REVIEW APPLICATION DETAILS – INDICATE RELEVANT QUALIFICATION AND UNITS (please V as required)		
CIOL Qualifications Level 7 Diploma in Translation	Unit 01 🗆 Unit 02 🗆 Unit 03 🗖	
CIOL Qualifications Level 6 Diploma in Public Service Interpreting	Unit 01 🗆 Unit 02 🗆	
	Unit 03 🗆 Unit 04 🗖 Unit 05 🗖	

QUALIFICATIONS



CIOL Qualifications Level 6 Diploma in Police	Unit 01
Interpreting	Unit 02
	Unit 03 🛛
	Unit 04 🛛
	Unit 05 🗆
CIOL Qualifications Level 3 Certificate in	Unit 01
Bilingual Skills – Police	Unit 02
	Unit 03 🛛
CIOL Qualifications Level 6 Certificate in	Unit 01
Translation	Unit 02
	Unit 03 🛛

Please provide full details to support your application:

QUALIFICATIONS



Please note that this application form will be returned if insufficient details are provided to initiate the appeal request. Please submit any additional and relevant supporting evidence together with this application form.

PAYMENT DETAILS	PRICE (£)	QUANTITY	SUM TOTAL
CIOL Qualifications Level 7 Diploma in Translation	£300 per Unit		£
CIOL Qualifications Level 6 Diploma in Public Service Interpreting	£300 per Unit		£
CIOL Qualifications Level 6 Diploma in Police Interpreting	£300 per Unit		£
CIOL Qualifications Level 3 Certificate in Bilingual Skills – Police	£300 per Unit		£
CIOL Qualifications Level 6 Certificate in Translation	£300 per Unit		£
	TOT	AL AMOUNT	£

Please send this form by email to : appeals@ciol.org.uk

PAYMENT DETAILS

You can pay via Bank Transfer or credit card (except American Express).

Please $\sqrt{1}$ your preferred method of payment:

BACS	Debit/Credit card
Bank transfer to CIOL Qualifications account, please see details below:	A member of the Client Services Team will email you a secure payment link.
Bank Transfer (BACS) Account name: IoL Educational	
Trust Development Development of Secolitorial	
Bank name: Royal Bank of Scotland Sort code: 16-00-15	
Account no: 23122157	
Swift Code (BIC): RBOSGB2L	
IBAN no: GB58RBOS 16001523122157	
Please write the transaction reference here:	

PLEASE RETAIN A COPY OF THIS FORM FOR YOUR RECORDS