

# ICCM / Stratford Business School

Application for ICCM Diploma Exemptions

Name

Address

Email:

Tel:

Units from which exemption is being claimed	
Qualification held (this must be less than 5 years old and at least at level 4 pre April 2005 and level 5 post April 2005)	
Awarding Body	Date .....
Evidence submitted	Copy certificate <input type="checkbox"/>
	Syllabus content <input type="checkbox"/>
Please indicate what exemption you are seeking	ICCM Diploma Unit only <input type="checkbox"/>
	ICCM Diploma Unit and HNC Unit <input type="checkbox"/> (this will require syllabus details)

For office use only:

ICCM Units awarded	Signed _____ ICCM Date _____
HNC Units awarded	Signed _____ SBS Date _____