



Letter of authorisation for primary source verification checks

Thank you for applying for a statement from Ecctis.

In order for further action to be take on your application, Primary Source Verification is required to confirm the authenticity of the award present to us. Ecctis needs your permission and your authorisation to check and verify your qualifications and identity data; to share your data with a partner organisation specialising in verification services; and to obtain relevant verification information from issuing authorities. As qualification verification has to deal with different kinds of institutions across all parts of the world, it is necessary for us to work with a partner organisation to offer a complete service. This letter authorises Ecctis and its partner organisation to obtain verification information about you from issuing authorities (eg universities, qualification awarding bodies, passport authorities) worldwide.

Please complete the form below and sign the declaration.

Your full name _____

Date of birth _____

Passport number _____

Nationality _____

**Current location
(town/city, country)** _____

I hereby confirm that:

1. I have read and fully understood this letter of authorisation.
2. I have read, understood and agree to the description of the service provided by Ecctis Terms and Conditions, and Ecctis' Privacy Policy.
3. The details I have supplied above are true and correct.
4. I grant the authority for Ecctis to share all necessary data and information relating to the uploaded qualification documentation and passport copy with Ecctis' verification partner organisations for the purposes of conducting primary source verification checks with the relevant issuing authorities.
5. I hereby authorise Ecctis, its verification partner organisations and their authorised affiliates, agents and subsidiaries, to verify the information and documents presented with my application form and to obtain the information requested. This may contain but is not limited to grades, dates of attendance, grade point average, degree / diploma certification, employment title, employment tenure, licence attained, status of the licence, and place of issue.
6. I confirm that a photocopy or scan of this authorisation should be accepted with the same authority as the original.

Your name (print) _____

Your signature _____

Date _____