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| **Functional Skills Queries** | |
| Email address |  |
| First Name |  |
| Last Name |  |
| Job Role |  |
| Contact Telephone |  |
| Organisation name |  |
| Organisation type |  |
| Topic query relates to: | |
| Exam Invigilation |  |
| Centre approval/Fast Track |  |
| Flexibility/exam rescheduling |  |
| Results/feedback |  |
| Support resources |  |
| Other (give details) |  |
|  | **Once completed please email form to:** [**FSReform@cityandguilds.com**](file:///\\cgli.int\dfs\G%20Drive\Marketing2\Activation%20Team\1.%20Brand\3.Templates\Word%20template\FSReform@cityandguilds.com) |