**When to use this form**

Please complete this form if you wish to request a Review of marking Enquiry about Results for one or more PEB examinations. You can request a Review of marking for multiple examinations on this one form. Please refer to the [PEB EaR Policy](http://www.cipa.org.uk/patent-examination-board/procedures/results-and-post-results-procedures/) before completing this form.

**Instructions**

1. Save this form on your computer before you start to fill it in.
2. Complete this form electronically by selecting or entering information where requested.
3. Save a copy of the completed form for your records.

**Personal Information**

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| --- | --- |
| **First Name:** |   |
| **Surname:** |   |
| **Candidate Number:** |   |

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| **Examination entry** |
| **Foundation Examination** | **Fee paid** |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| **Final Examination** | **Fee paid** |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |
| Choose an item. | Choose an item. |

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| **Litigation Skills**  | **Fee paid** |
| **Introductory Certificate of Patent Administration (ICPA)** | **Fee paid** |
| Choose an item. | Choose an item. |

**Payment details**

Payment can be made via BACs ONLY

**BACs payments** should be made as follows:

Reference: You MUST insert your five digit candidate number as the reference

Sort code: 40-11-58

Account number: 50077429

Account name: Patent Examination Board

IBAN: GB84HBUK40115850077429

SWIFT code: HBUKGB4B

**Your Bank Account Details**

If applicable, refunds will be made, in accordance with the [PEB EaR Policy](http://www.cipa.org.uk/patent-examination-board/procedures/results-and-post-results-procedures/), to the account you nominate below.

1) **Account Name**

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2) **Account Number**

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3) **Sort Code**

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**Additional Details needed for Non-UK Bank Accounts**

4) **Swift Number**

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5) **IBAN Number**

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Return a copy of the completed form as an attachment by e-mail to: peb@patentexaminationboard.org.uk. You should also use this e-mail for any enquiries.

Please put your candidate number followed by the words ‘**Review of marking EaR request**’ in the e-mail subject line.