

2019 cycle Provider EXACT Records Supplies

Provid	er name: _				
Institu	tion code: _				
	ould like to reco		covering our own a	pplications and placed	
	understand this	we have read and agreed to the <u>EXACT terms and conditions</u> and this data is supplied under schedule 1 and is therefore for internal is not for publication			
		this transfer cons	•	nd undertake to handle	
UCAS I Date:	Primary Correspo	ondent name:			

Please return this completed form to $\underline{exact@ucas.ac.uk}.$