

Functional Skills Assessment confirmation

Date: Click here to enter a date.

Dear learner,

Re: Confirmation of your Click here to enter text.

This is to confirm your place for the following assessment(s):

LVS Training learner ID: Click here to enter text.

Date: Click here to enter a date.

Start Time: Click here to enter text.

Qualification: Click here to enter text.

Level: Click here to enter text.

Components to sit on the day: Click here to enter text.

Location: [LVS Training, Lewinson Centre, 165-167 High Road, Willesden, London, NW10 2SG.](#)

Payment Received: Thank you for your payment of Click here to enter text.

Please arrive at least 20 minutes prior to the start time. To enter the examination room and be able to sit the exam, you **MUST** bring:

- Functional Skills Assessment confirmation letter
- A valid photo ID

Please [contact us](#) if you have any queries, stating your full name, date of birth and your chosen exam.

Yours sincerely

LVS Training team

Office use only

Learner Full name:	LVS Training learner ID.
<input type="checkbox"/> Confirmation letter validity check completed	<input type="checkbox"/> Photo ID seen

Learner sitting the following Exam	Exam date
Functional Skills English <input type="checkbox"/> Reading <input type="checkbox"/> Writing	_____
Functional Skills Mathematics <input type="checkbox"/> Non-Calculator <input type="checkbox"/> Calculator	_____

Signed by

Invigilator full name (printed)

Invigilator full name (signed)

Date

*To be scanned or given to LVS Training Administration department.