



**EXCEPTIONS DOCUMENTATION CHECKLIST**  
**Form 12.6.4**

Please complete this form and return it with the required documentation to the **IBOC Office**.

Please type or print

Candidate's name: \_\_\_\_\_

Candidate's address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Telephone: Home \_\_\_\_\_ Work \_\_\_\_\_

Email: \_\_\_\_\_

I enclose (*please tick*):

\_\_\_ Application by trainee

\_\_\_ Application by principal supervisor

\_\_\_ Endorsement by TSTA (or if necessary PTSTA) in the new field

\_\_\_ Second supervisor's agreement

\_\_\_ Training plan