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| Certificate Service |
| Management Contacts / Sub-LRA Officers Form |

|  |  |
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| **Organisation (legal name)** | [Insert Name] |
| **Organisation Address** | [Insert Address] |

The individuals listed below shall act as Management Contacts & Sub-LRA Officers for the purposes of using the Jisc Certificate Service (<https://community.jisc.ac.uk/library/janet-services-documentation/jcs-terms-and-conditions>) and obtaining Certificate Services from Jisc:

Name:

Job Title:

Email Address:

Telephone Number:

Name:

Job Title:

Email Address:

Telephone Number:

[We recommend at least two listed contacts and more should be added if required]

**Authorisation**

I hereby acknowledge that I have appointed each representative listed above as Management Contacts & Sub-LRA Officers for the purposes of obtaining Certificate Services from Jisc.

Full Name:

Job Title:

E-mail Address:

Telephone Number:

Date:

Signature of Confirming Person: