



**SNOT**  
Studynlearn National Olympiad Test

**Study 'n' Learn**<sup>®</sup>  
*The smarter way to study !*

## School Consent Letter

**SNOT 2024-2025**

I \_\_\_\_\_ Principal /Director/ Owner  
of \_\_\_\_\_ (School Name)

hereby grant my consent to conduct the SNOT Olympiad (StudynLearn National Olympiad Test) in my school in the academic year 2024 – 25.

Your Name: \_\_\_\_\_

Your Signature: \_\_\_\_\_

School Stamp:

Date: \_\_\_\_\_