# DEPARTMENT OF HIGHER EDUCATION AND TRAINING

## EXAMINATION ENTRY FORM

**511088472 CERTIFICATE OF COMPETENCY**

**2019/06**

### 1. PERSONAL INFORMATION

1. **SURNAME**
2. **FULL NAMES**
   - (a) 
   - (b) 
   - (c)
3. **POSTAL ADDRESS**

### 4. POSTAL CODE
5. **APPRENTICE**
6. **MOTHER TONGUE**
7. **ID NO.**
8. **DATE OF BIRTH**
9. **PREVIOUS EXAM. NO.**

### 10. GENDER
11. **NUMBER OF INSTRUCTIONAL OFFERINGS FOR CERTIFICATE**
12. **RACE**
13. **PREVIOUS LEVEL PASSED**
14. **VERIFIED.**

### C. SUBJECTS

1. **ATTENDANCE** (Refer to the instructions Section C)
2. **LANGUAGE**

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### D. CERTIFIED CORRECT

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**SIGNATURE OF CANDIDATE**

**SIGNATURE OF EXAM OFFICER**

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