



education

Department of Education
FREE STATE PROVINCE

APPLICATION FORM FOR THE SENIOR CERTIFICATE

VERY IMPORTANT: SEND YOUR APPLICATION TO:

THE DIRECTOR, CERTIFICATION SECTION, PO BOX 521, BLOEMFONTEIN, 9300

TELEPHONE: (051) 404 8320

FAX: (051) 404 8322

APPLICATION FEE: R 25,00

1 JUNE 08 =R30,00

1 JUNE 09 =R35,00

1 JUNE 2010=R40

1 JUNE 2011=R46,00

NB: POSTAL ORDERS AND CHEQUES (CROSSED) SHOULD BE MADE PAYABLE TO THE FREE STATE PROVINCIAL GOVERNMENT

SURNAME OF APPLICANT : _____

MAIDEN NAME : _____

FULL NAMES : _____

ID NUMBER :

DATE OF BIRTH :

D D M M Y Y Y Y

ADDRESS OF APPLICANT : _____

POSTAL CODE

TEL. NUMBER (WORK) :

Code

Telephone Number

TEL. NUMBER (HOME) :

Code

Telephone Number

EXAMINATION NUMBERS :

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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YEAR	FULL TIME / PART TIME	NAME OF SCHOOL	EXAMINATION NUMBER	SUBJECTS
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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SIGNATURE OF APPLICANT

DATE