



# DEUTSCHE HÖHERE PRIVATSCHULE WINDHOEK

## CAMBRIDGE INTERNATIONAL CANDIDATE EXAMINATION ENTRY FORM

Contact Detail: Cell number \_\_\_\_\_ Email: \_\_\_\_\_

Surname: \_\_\_\_\_ Names: \_\_\_\_\_

Date of Birth: (dd/mm/yyyy) \_\_\_\_\_ (Please attach a copy of birth certificate)

Gender:

Male

Female

English First Language:

Yes

No

Date of previous series: \_\_\_\_\_ Previous Center and Candidate number: \_\_\_\_\_

Subjects

	SUBJECT	SYLLABUS CODE	OPTION/ COMPONENT		LEVEL				
			Option	Component	A	AS	IGCSE		rewrite
							Core	Ext	
1.									
2.									
3.									
4.									
5.									
6.									
7.									

.....

Signature Candidate

Payment received: Cash  EFT

.....

Exam Officer

.....

Date processed

