



# 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/ ID)

Gender: Male  Female

English First Language: Yes  No

Psychological Evaluation: Yes  (Attach copy) No

Special consideration: Extra Time  Reader  Scribe

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

(Attach proof of payment)

.....  
Date processed

.....  
Exam Officer

.....  
Payment Officer

