



**basic education**  
 Department:  
 Basic Education  
 REPUBLIC OF SOUTH AFRICA

|                 |       |
|-----------------|-------|
| Receipt number: | _____ |
| Date:           | _____ |
| Amount:         | _____ |
| Signature:      | _____ |

**CHIEF DIRECTORATE: NATIONAL ASSESSMENT AND PUBLIC EXAMINATIONS**  
 Private Bag X895, Pretoria, 0001, South Africa, 222 Struben Street, PRETORIA, 0002. 0002. Tel: +27 12 357 3256, Fax: 012 323 0603, <http://www.education.gov.za>

DULY COMPLETED APPLICATION FORM SHOULD BE ACCOMPANIED BY CASH; CHEQUE OR POSTAL ORDER (MADE OUT TO THE DEPARTMENT OF BASIC EDUCATION)  
 (Application fee is valid from **01 April 2019 – 31 March 2020**).

APPLICATION FOR: (Mark with "X")

**PLEASE NOTE: A CERTIFIED COPY OF YOUR ID DOCUMENT/BIRTH CERTIFICATE SHOULD BE ATTACHED TO YOUR APPLICATION**

**(Application fees are valid from 01 April 2019 – 31 March 2020).**

|  |   |                |
|--|---|----------------|
|  | <b>Senior Certificate - Combination (Grade 12) NSC</b>                              | <b>R118.00</b> |
|  | <b>Statement of Results / Confirmation document</b>                                 | <b>R47.00</b>  |
|  | <b>Subject certificate (Umalusi)</b>  | <b>R118.00</b> |
|  | <b>Letter to Embassy (Authentication of qualifications for studies/work abroad)</b> | <b>R47.00</b>  |

**Please ensure that your personal particulars are in accordance with your ID document**

|                      |             |
|----------------------|-------------|
| Surname and Initials |             |
| Full Name            |             |
| Maiden Name          |             |
| Postal Address       | Code: ..... |
| Tel no (Home)        |             |
| Cell no              |             |
| ID number            |             |
| Email Address        |             |

Please mark with an X to indicate if the certificate should be posted to the address as indicated above or kept in the office for collection.

|                |                          |
|----------------|--------------------------|
| <b>Collect</b> | <input type="checkbox"/> |
| <b>Post</b>    | <input type="checkbox"/> |

**EXAMINATION INFORMATION**

| Year and Month of exam | Examination number | School/College attended | Province (If applicable) |
|------------------------|--------------------|-------------------------|--------------------------|
|                        |                    |                         |                          |
|                        |                    |                         |                          |
|                        |                    |                         |                          |
|                        |                    |                         |                          |
|                        |                    |                         |                          |
|                        |                    |                         |                          |

.....  
 Signature of Applicant

.....  
 Date