



ASSESSMENT & EXAMINATIONS

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ASSESSMENT INSTRUCTION 12 of 2011

**TO: DEPUTY DIRECTORS-GENERAL
CHIEF DIRECTORS
HEAD OFFICE DIRECTORS AND DISTRICT DIRECTORS
CHIEF EDUCATION SPECIALISTS
EDUCATION DEVELOPMENT OFFICERS
DEPUTY CHIEF / SENIOR EDUCATION SPECIALISTS
PRINCIPALS ABET CENTRES
TEACHER UNIONS / ORGANISATIONS**

DATE: 14 FEBRUARY 2011

**2011 ABET JUNE EXAMINATIONS
REGISTRATION OF CANDIDATES**

The registration form for candidates entering the 2011 ABET L4 examination in June 2011 is attached.

The closing date for entry forms at District Offices is **Friday 11 March 2011**.
No late entries will be accepted.

The closing date for entry forms at the Provincial Office is Friday 18 March 2011.

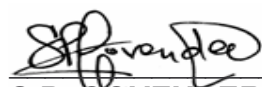
Kindly note the following when completing the official Registration Form:

ECDE/EXAMS/ABET L4 (1)

1. **Sequence number** (Sequence in the school/centre).
2. **Exam Centre Name:** Ensure the correct Exam Centre name (Name of school) appears on each entry.

3. **Exam Centre No:** Ensure the correct Exam No. appears on each entry. If number is not available, leave blank.
4. **Medium in which you wish to write:** Cross Afrikaans or English. Very important because papers will be printed and distributed according to this information.
5. **Home language:** Write the correct code in the appropriate block.
6. **Certificate language:** Statement of Results: Write the correct code in the appropriate block. Statement of Results will be in English and the selected language.
7. **Immigrant** – Put a Y for Yes or N for No. An immigrant is a candidate who entered the South African Schooling system in Grade 7 or later and for whom an Immigrant Concession has to be obtained from the Directorate: Assessment & Examinations.
8. **Disabled** – Write the correct code in the appropriate block. Application must be made on behalf of a learner with special education needs for a concession allowing alternative examining procedure(s) during the ABET L4 examination.
9. **Race:** Write the correct code in the appropriate block
10. **Date of Birth:** e.g. 19880319 = 19 March 1988
11. **Gender:** Write M or F in the appropriate block
12. **Identity number:** The candidate must have an ID book.
13. **Surname** – As in ID book or on birth registration certificate.
14. **First Name(s)**
15. **Special Character in name:** Encircle Yes or No. If yes write the letter with the character in the block, e.g. é
16. **Postal Address**
17. **Telephone code**
18. **Telephone number** – where the candidate can be reached if necessary.
19. **Mark the learning areas in appropriate blocks**
20. **Applicant must sign:** A signature means that all information in the form is correct and true.
21. **Centre Manager's/Principal's name** – The one who is going to sign on behalf of the centre.
22. **Centre Manager's/Principal's Signature:** A signature means that all the information is correct and true.

ABET Principals are reminded that the June Examination is for ABET L4 candidates for whom moderated CASS marks were submitted in 2010. Kindly enter only those candidates who will write in June to avoid fruitless expenditure on both printing and the appointment of markers.



S.P. GOVENDER
CHIEF DIRECTOR: CURRICULUM MANAGEMENT

ABET LEVEL 4 EXTERNAL ASSESSMENT

C. SUBJECT CHOICES

19. MARK WITH AN "X" IN THE APPROPRIATE BLOCK (LEARNING AREA AND CODE)

LEVEL 4	SUBJECT CODES	SUBJECT DESCRIPTION
<input type="checkbox"/>	LCAF	AFRIKAANS
<input type="checkbox"/>	LCEN	ENGLISH
<input type="checkbox"/>	LCSO	SESOTHO
<input type="checkbox"/>	LCZU	ISIZULU
<input type="checkbox"/>	LCXH	ISIXHOSA
<input type="checkbox"/>	LCXI	XITSONGA
<input type="checkbox"/>	TRVT	TRAVEL AND TOURISM
<input type="checkbox"/>	ANHC	ANCILLARY HEALTH CARE
<input type="checkbox"/>	MS	MATHS AND MATHS SCIENCE
<input type="checkbox"/>	ML	MATHS LITERACY
<input type="checkbox"/>	NATS	NATURAL SCIENCES
<input type="checkbox"/>	TECH	TECHNOLOGY
<input type="checkbox"/>	HSCC	HUMAN AND SOCIAL SCIENCES
<input type="checkbox"/>	EMSC	ECONOMIC AND MANAGEMENT SCIENCES
<input type="checkbox"/>	ARTC	ARTS AND CULTURE
<input type="checkbox"/>	LIFO	LIFE ORIENTATION
<input type="checkbox"/>	SMME	SMALL, MEDIUM AND MICRO ENTERPRISES
<input type="checkbox"/>	AAAT	APPLIED AGRIC. AND AGRIC. TECHNOLOGY.

D I hereby declare the information furnished herein is correct

20. Signature of Applicant

Date

21. Centre Manager's Name and Signature

Date

22. Centre Manager's Signature

Date

School Stamp

