

**Province of the Eastern Cape**

DEPARTMENT OF EDUCATION ISEBE LEZEMFUNDO DEPARTEMENT VAN ONDERWYS

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| 01 | Mt Fletcher | 07 | Queenstown | 13 | Ngcobo | 19 | King Williams Town | Rating Code | **%** | Description of Competence | Rating Code | **%** | Description of Competence |
| 02 | Mt Frere | 08 | Lady Frere | 14 | Cofimvaba | 20 | Graaff-Reinet |
| 03 | Maluti | 09 | Cradock | 15 | Dutywa | 21 | Grahamstown | 7 | 80-100 | Outstanding Achievement | 3 | 40-49 | Moderate Achievement |
| 04 | Lusikisiki | 10 | Mthata | 16 | Butterworth | 22 | Port Elizabeth | 6 | 70-79 | Meritorious Achievement | 2 | 30-39 | Elementary Achievement |
| 05 | Mbizana | 11 | Qumbu | 17 | Fort Beaufort | 23 | Uitenhage | 5 | 60-69 | Substantial Achievement | 1 | 1-29 | Not Achieved |
| 06 | Sterkspruit | 12 | Libode | 18 | East London |  |  | 4 | 50-59 | Adequate Achievement |  |  |  |

Districts (Mark with an X) **Key to Overall Performance Form No. EC108C2**

Page of

**Grade** 9

**Internal Promotion Schedule: Senior Phase**

Name of School EMIS Number Year Ending

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Population Group

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| A=Asian | B= Black | C = Coloured | I = Indian | W = White |

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|  | | | | | **Learning Areas** | | | | | | | | | | | | | |  | |
|  | | | | | **Fundamentals** | | | | | | | | |  | | | | |  | |
| **Surnames, First Name, listed Alphabetically (A-Z) No Class Schedules Accepted**  Surname, First Name | Gender (M/F) | Population  Group | Identity Number/Date of Birth  (YYMMDD | Years in  Phase | Afrikaans Home Language | Afrikaans 1st Additional Language | English Home  Language | English 1st Additional Language | SeSotho Home Language | IsiXhosa Home Language | IsiXhosa 1st Additional Language | Maths | L0 | AC | EMS | NS | SS | TECH | Progression  RP/NRP | **Remarks** |
|  |  |  |  |  | **Percentage (%)** | | | | | | | | | | | | | |  |  |
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| **\*\* I declare that::** | **(a)** | **The learners on this promotion schedule have been correctly promoted/ retained as per promotion policy.** |
|  | **(b)** | **No learners have been omitted from this schedule.** |
|  | **(c)** | **All marks have been calculated correctly, transferred to this schedule correctly and appear in the correct subject column.** |
|  | **(d)** | **The reports given to parents have been generated from this schedule and have exactly the same marks on them.** |
|  | **(e)** | **No alterations will be done to this schedule after it has been signed off by the EDO and submitted to the Provincial Office.** |

Educator Name (Print) Educator Signature Principal Name (Print) Principal Signature EDO Name (Print) EDO Signature

Date Date Date

**\*\* As a signatory to this schedule I declare that I have read and understood the points a-e above.**

SCHOOL STAMP