

Province of the EASTERN CAPE Department of Education

DIRECTORATE: ASSESSMENT AND EXAMINATIONS

NATIONAL SENIOR CERTIFICATE 2011 GRADE 11

Learner Registration Form

A. All																											
Grade:	1	1																									
Year:	2 0 1 1																										
Registration Type:	F = Full-time : P = Part-time																										
Exam Centre Number:	0 EMIS Number:																										
Exam Centre/School Name:																											
B. Personal Information																											
Date of Birth:	Y		Y	Y	M	M	D	D	1						c	end	er:		M =	Male	:F=	Fema	ale				ı
ID Type:	R = RSA : P = Foreign Passport				j								Immigrant: Y = Yes : N =				N = 1	= No									
ID/Passport Number:]																									
Study Permit:		Y = '	Yes : N	= No	ı			1							<u> </u>						l						
Surname:																											
First Names:																											
Race: (Statistical purposes only)			A = A	sian		B =	Black		C =	Colou	red	I = I	ndian		W =	White	е	U	= Uns	pecifie	ed						
Home Language:		A = Afrikaans I = Siswati			i	~					= isiNdebele P = Sepedi				i	S = SeSotho											
	T = XiTsonga V = TshiVenda W = SeTswana X = isiXhosa Z = isiZulu U = Unspecified					cified																					
Special Needs:								ESSIO) : B =	Blind	: D = 1	Deaf :	N = No	one								
Mathematical Disorder:	Y = Yes : N = No CONCESSION APPLICATION REQUIRED																										
C. General Information (Compulsory for all learners)																											
Postal Address																											
Postal Code												Tele															
Cellphone:												e-Ma	ail Ad	ddre	ss:												
																							_		200		

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EASTERN CAPE PROVINCIAL ASSESSMENT INSTRUCTION



D. Subjects and Codes

			Е	Α
Afrikaans Home Langu	ıage	AFRHL		
Afrikaans First Addition	nal Language	AFRFA		
English Home Langua	ge	ENGHL		
English First Additiona	l Language	ENGFA		
IsiXhosa Home Langu	age	XHOHL		
IsiXhosa First Addition	al Language	XHOFA		
IsiZulu Home Languag	je	ZULHL		
Sesotho Home Language		SESHL		
Mathematical Literacy	!	MLIT		
Mathematics		MATH		
Life Orientation		LIFE		
Agricultural Manageme	ent Practices	AGRM		
Agricultural Science		AGRS		
Agricultural Technology		AGRT		
Dance Studies		DNCE		
Design		DSGN		
Dramatic Arts		DRMA		
Music		MUSC		
Visual Arts		VSLA		
Accounting		ACCN		
Business Studies		BSTD		
Economics		ECON		
Afrikaans Second Add		AFRSA		
IsiXhosa Second Addit	tional Language	XHOSA		

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Eastern Cape Provincial Assessment Instruction



		E	Α
Civil Technology	CVLT		
Electrical Technology	ELTT		
Mechanical Technology	MCHT		
Engineering Graphics and Design	GRDES		
Geography	GEOG		
History	HIST		
Religion Studies	RLGS		
Computer Applications Technology	CATN		
Information Technology	INFT		
Life Sciences	LFSC		
Physical Sciences	PHSC		
Consumer Studies	CNST		
Hospitality Studies	HOSP		
Tourism	TRSM		
Arabic Second Additional Language	ARBSA		
French Second Additional Language	FRHSA		
German Second Additional Language	GRMSA		

Candidates Signature	Date		/Guardian ne & Initials e Print	Parent/Guardian Signature	Date			
I certify that this candidate satisfies attendance, conduct and assessment requirements to be registered for NSC and that the details are correct in all aspects								
Teacher Responsible Surname & Principal Surname & Initials (Please								
Initials (Please Print)	`							



AN	NEXURE B					
NAME OF SCHOOL	EMIS NO					
DISTRICT	EXAM CENTRE NO					
		NUMBER				
TOTAL NO OF LEARNERS IN GRADE 11						
NO OF GRADE 11 CLASSES						
AVERAGE NO OF LEARNERS PER CLASS						
NO OF LEARNERS IN GRADE FOR 1 ST YEAR						
NO OF LEARNERS IN GRADE FOR 2 ND YEAR						
NO OF LEARNERS IN GRADE FOR 3 RD YEAR						
NO OF LEARNERS IN GRADE WITH SPECIAL NEEDS						
NO OF IMMIGRANT LEARNERS IN GRADE						
NAMES OF GRADE 11 EDUCATORS (USE ADDI	TIONAL SHEET IF NE	CESSARY)				
12.		·				
34						
56	·					
NAME OF PRINCIPAL;						
SIGNATURE OF PRINCIPAL:		School Stamp				
SIGNATURE OF PRINCIPAL.						
FOR OFFICE USE ONL' RECEIVED AT DISTRICT OFF						
NAME OF OFFICIAL:						
SIGNATUREDATE:						
CHECKED BY: NAME						
OFFICIAL:SIGNATURE	:	DATE:				
CAPTURED AT DISTRICT BY:						
NAME						
CAPTURER:SIG	NATURE:					

