

EXAMINATIONS DEPARTMENT, MINISTRY OF EDUCATION, BRUNEI DARUSSALAM
BRUNEI-CAMBRIDGE GCE 'AS' / 'A' LEVEL, OCTOBER/NOVEMBER 2023

LATE ENTRY

ENTRY FORM FOR PRIVATE CANDIDATES (Use CAPITAL LETTERS throughout)

FOR OFFICIAL USE

BN _____ / _____

**PLEASE ATTACH
FOLLOWING DOCUMENTS:**

1. Copy of GCE 'O'/'AS'/'A' LEVEL Certificate or any equivalent certificate.
2. Copy of School Leaving Certificate
3. Approval / Chop of Employer or Head of Department (For Candidates who are working)
4. Copy of Identity Card (I.C)
5. Medical report (for Access Arrangement only)

Form which are incomplete with the above documents **WILL NOT BE ACCEPTED / PROCESSED**

TIME OF PAYMENT
Monday to Thursday

8.00 am to 11.00 am and 1.30 pm to 3.00 pm

Saturday

8.00 am to 10.00 am

REGISTRATION CLOSING DATE
07 September 2023 (Thursday)

CENTRE OF EXAMINATION :		<input type="checkbox"/> BANDAR SERI BEGAWAN	<input type="checkbox"/> TUTONG	<input type="checkbox"/> SERIA	<input type="checkbox"/> KUALA BELAIT	<input type="checkbox"/> TEMBURONG
CANDIDATE'S NAME (NOT to exceed 60 characters including spaces in between names)						GENDER M/F
						Date of Birth D M Y

Require access arrangement ☐ Yes ☐ No (If yes, please attach medical report)

PREVIOUS ENTRY			SYLLABUS DETAIL (Subject offered)			
EXAMINATION JUNE/NOVEMBER	CENTRE NO	CANDIDATE NO	SYLLABUS CODE			
	BN		Subject Name			
NUMBER OF CREDITS OBTAINED			Option Code			

CANDIDATE'S FULL NAME AND MAILING ADDRESS	
MR/MRS/MISS: _____	I.C.No: _____
ADDRESS : _____	
_____ POST CODE : _____	
TEL NO : (HOME) _____ (MOBILE) _____ (OFFICE) _____	
EMAIL: _____	
<i>Nota: Calon-calon persendirian hendaklah mengisikan alamat dan e-mel dengan betul bagi tujuan persuratan.</i>	
_____ Signature of Applicant	_____ Date

SCHOOL/EMPLOYER'S CHOP

 Signature of Principal /
 Head of Department / Section /
 Employer

Date: _____

PAYMENT RECEIVED (FOR OFFICIAL USE)	
Receipt No:	
Total :	
Date :	
Signature :	

EXAMINATION FEES (FOR OFFICIAL USE)	
ENTRY FEE	\$ 40.00
LOCAL FEE	\$ 20.00
SUBJECT FEE 'AS' LEVEL (\$40.00 X)	\$
SUBJECT FEE 'A' LEVEL (\$60.00 X)	\$
PRACTICAL FEE (\$40.00 X)	\$
LATE ENTRY FEE (\$50.00 X)	\$
TOTAL	\$

CERTIFIED BY EXAM OFFICER

Signature : _____
 Code : _____
 Date : _____

EXAM OFFICER'S COMMENT
