

<b>Candidate Full Name:</b> (in Block Letters)		<b>Exam Session:</b>	
<b>Date of Birth:</b>		<b>Name of School:</b>	
<b>NRC/ Passport No:</b>		<b>Gender:</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>
<b>Address:</b>			
<b>Telephone:</b>		<b>Email:</b>	

<b>LEVEL 4</b>		<b>Fee:MMK 74,360</b>	
<input type="checkbox"/>	Financial Accounting (2015 Syllabus)	<b>20101</b>	
<input type="checkbox"/>	Management Accounting (2015 Syllabus)	<b>20102</b>	
<input type="checkbox"/>	Organisational Behaviour and Performance (2015 Syllabus)	<b>20103</b>	
<input type="checkbox"/>	Other _____		<b>Total MMK _____</b>

**Data Protection ACT 1998**

For the purpose of the Data Protection Act 1998, all personal information on this form is held in accordance with the provisions of the Act and may be passed on to third parties for the promotion of goods and services. All rights, duties and responsibilities under the Act are acknowledged.

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I make this entry according to the provisions of the published regulations and disclaimer which I have studied. I understand that I shall be allow to sit only for those subjects which I have entered on this form.

Signature of Candidate: \_\_\_\_\_

Date: \_\_\_\_\_

**For office Use Only**

Cashier: \_\_\_\_\_

Receipt No.: \_\_\_\_\_

Date: \_\_\_\_\_