

LCCI Apr 2023 Series registration period 24 Jan 2023 to 15 Feb 2023

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

LEVEL 4		Fee: MMK 121,716	
<input type="checkbox"/>	Financial Accounting (2015 Syllabus)	20101	
<input type="checkbox"/>	Other _____		Total MMK _____
For candidates who opt for Group Diploma Awards MUST complete this session. <u>Write down subject codes besides the Diploma Title.</u>			

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.

Disclaimer

The British Council and the Examination Boards take all reasonable steps to provide continuity of service. We feel sure you will understand, however, we cannot be held responsible for any interruptions caused by circumstances beyond our control. If examinations or their results are disrupted, cancelled or delayed, every effort will be made to resume normal or service as soon as possible. The British Council's liability will be limited to the refund of the registration fee or re-testing at a later date.

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: _____