

ANNEXURE B

	OMINATION AND ase Tick selection Be		ENT:					
Cŀ	IIEF INVIGILATOR		CHIEF	EXAMI		OFFICER (June o	nly) 🛛	
SENIOR INVIGILATOR				INVIG	ILATOR			
	BE COMPLETED BY	THE PRINCIPA	AL AND SEN	NT TO THE C	IRCUIT MA	ANAGER F	OR <u>EACH OF THE P</u>	ARTICULAR
* A	ttach a certified cop	oy of ID docu	ment, highe	est qualificat	ion and o	one-page (CV with this nominc	ation form
Exc	mination: (Tick app	ropriate optic	on)					
	National Senior National Senior				ation			
PA	RT A: NOMINATION C	OF THE SENIOI	R INVIGILAT	OR (TO BE C	OMPLETED	O BY THE SC	CHOOL PRINCIPAL)	
1.	Name of school/ce	entre:						
2.	Centre number:							
3.	Contact details of invigilator:							
	Name and Surname:							
	Persal Number:							
	Cell number:							
	Address:							
	RT B: INTERVIEW AND prview conducted o	-					AL)	
.Nc	mination is supporte	ed by principo	al:	□ Yes □	No			
sig Da	NATURE OF PRINCIP. TE:	AL			-	SIGNATURE DATE:	OF SENIOR INVIGIL	ATOR
PA	RT C: FINAL APPROV	AL BY HEAD C	OFFICE					
	pointment approved documents submitte							