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**CONTACT DETAILS FOR SCHOOL DELEGATES**

**SCHOOL NAME:** \_\_\_\_\_

**SCHOOL LANDLINE NUMBER:** \_\_\_\_\_

<b>PRINCIPAL NAME</b>	<b>CELLPHONE NO.</b>	<b>EMAIL ADDRESS</b>

<b>DEPUTY PRINCIPAL NAME</b>	<b>CELLPHONE NO.</b>	<b>EMAIL ADDRESS</b>

<b>CHIEF INVIGILATOR NAME</b>	<b>CELLPHONE NO.</b>	<b>EMAIL ADDRESS</b>

\_\_\_\_\_  
**SIGNATURE OF PRINCIPAL**

\_\_\_\_\_  
**DATE**

**SCHOOL STAMP**

**Email to [Mfana.Dyasi@westerncape.gov.za](mailto:Mfana.Dyasi@westerncape.gov.za)**