



Sri Lankan International School, Riyadh

P.O. Box. 27849, Riyadh – 11427

Kingdom of Saudi Arabia

APPLICATION FOR PEARSON EDEXCEL IGCSE/ IAS / IAL - JUNE 2023 EXAMINATION

Step 1: Candidate Details

Please ensure that your contact details and information provided are accurate and all necessary documents are attached to this form in order to prevent any delay in processing your application.

| | | | | | | | | | | | | | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Candidate's Name: | | | | | | | | | | | | | | | | | | | | |
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(Please write your full name in CAPITAL letters as per passport. The same will appear on the certificate. Any inaccuracies on the exam documents must be reported in writing to Examination Coordinator of SLISR immediately)

Paste Recent Photo here

| | | | | | | | | | | | | | | | | | | | | |
|--|------------------------------|-----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Have you taken Pearson Edexcel exams before? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | | | | | | | | | | | | | | | | | | |
| If yes, UCI No.: | | | | | | | | | | | | | | | | | | | | |

Example: 97293B140999K

| | | | | | | |
|----------------|------------|--------------|-------------|---------|------------------------------------|---------------------------------|
| Date of Birth: | | | | Gender: | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| | <i>Day</i> | <i>Month</i> | <i>Year</i> | | <i>Please tick appropriate one</i> | |

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|----------|----------------------------------|----------------------------------|-----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| ID Type: | <input type="checkbox"/> Pas sdo | <input type="checkbox"/> Iq a ma | Iqama / Passport No.: | | | | | | | | | | | | | | | | | |
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|--------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Parent's Mobile: | | | | | | | | | | | | | | | | | | | | |
| Home Telephone: | | | | | | | | | | | | | | | | | | | | |
| Candidate's email: | | | | | | | | | | | | | | | | | | | | |
| Parent's email: | | | | | | | | | | | | | | | | | | | | |
| Address in Riyadh: | | | | | | | | | | | | | | | | | | | | |

All identification document must have your photograph. Please attach a copy of valid Passport or Iqama.



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Special Arrangements and Special Needs

Do you have any special needs due to ill health/medical conditions? Yes No

If yes, please specify your requirements below. You must attach latest Medical Report supporting evidence with the form.

Step 2: IGCSE / IAS / IAL - Subjects Entry Fee Calculation

Enter all *subject codes* and *option codes* registering for the exam session. The entry details will guide you regarding available subject/options codes.

| S. No | Qualification Level | Subject Title | Subject Code | Option Code* | Fee in SAR |
|---------------|---------------------|---------------|--------------|---|------------|
| E.g | IGCSE/ IAS / IAL | Biology | 4BI1/WBI11 | XBI11 only for IAS/IAL (if you take all units of the subject) | Eg 455 |
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| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| TOTAL: | | | | | |



Step 3: Declaration

Declaration by candidate / parent:

Please **tick / circle** the boxes

- I certify that the information on this form is complete and accurate to the best of my knowledge and that I have referred to the syllabus specifications to ensure that I am registering for the correct subject.
- I recognize that I am liable to pay fees for any entry/amendment fee **after** the deadline for registration.
- I have not made and will not make an entry for any subject at any other Centre/School for the same exams session.
- I understand that SLISR is not responsible for any clash of timetable that may arise due to above.
- I agree to comply with the Pearson regulations for the Pearson examinations and with the arrangements made by the SLISR Examination Board.
- I agree to abide prevailing examination rules, policies/procedures set out by SLISR Examination Board.
- I understand that fees are neither refundable nor carried forward to next examination session after deadline.

| | |
|-----------------------------|--|
| Name of Parent / Applicant: | |
| Signature: | |
| Date: | |

IMPORTANT NOTICE: TO BE COMPLETED WHERE THE CANDIDATE IS UNDER THE AGE OF 18

As the candidate's Parent / Guardian, I hereby agree to the terms set out in this Registration Form & permit my child to leave the exams venue unaccompanied after examination.

| | |
|-------------------|--|
| Name of Parent | |
| Signature | |
| Telephone Number: | |
| Email ID: | |

Disclaimer: The SLISR Centre and the Examining Boards take all reasonable steps to provide continuity of service. We feel sure you will understand, however, that 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 service as soon as possible. The SLISR Centre's liability will be limited to the refund of the registration fee or retesting at a later date.