

FORM B

LIST OF CANDIDATES FOR C.E.S.A. EXAMINATION HELD

ON(Insert the date)

*The names of the candidates must be typewritten or printed in ink on this form in ascending alphabetical order.
A photocopy of the form showing the Assessor's marks will be sent to the centre concerned.
The names shown on this form are the names that will appear on the certificates of successful candidates.*

SUBJECT			GRADE <i>(Please use a separate Form "B" for each GRADE)</i>	
CONTACT PERSON:				
INSTITUTION:				
INSTITUTION ADDRESS:				
	Assessor's		FAMILY NAME <i>(In alphabetical order)</i>	FIRST NAME
	Grade	Mark		
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

-----For office use only-----

Received ____/____/____

Results notified ____/____/____

Sent to marker ____/____/____

Entered in database ____/____/____

Returned from marker ____/____/____

Certificates sent ____/____/____

form b - student results.doc

This declaration is to be attached to the completed B Form



The Commercial Education Society of Australia

Under Vice-Regal Patronage of The Governor-General
Her Excellency Ms Quentin Bryce AC

ABN 50 000 004 731

EXAMINATION SUBJECT: _____ **GRADE:** _____

DATE OF EXAMINATION: _____

I HEREBY TRULY DECLARE that the above examination was conducted in my presence and on the date shown above, that the candidates did not receive any assistance, that the worked papers were handed in according to by-laws dealing with time allowances, and that no alteration was made to the papers after the examination.

Supervisor's Name: _____
(Please print in block letters)

Supervisor's Address: _____

_____ Postcode _____

Supervisor's Signature: _____

General Secretary
The Commercial Education Society of Australia
4 Cross Street
HURSTVILLE NSW 2220 AUSTRALIA