

MINISTRY OF EDUCATION, TECHNOLOGICAL AND VOCATIONAL TRAINING  
BARBADOS, W.I.

BARBADOS SECONDARY SCHOOLS' ENTRANCE EXAMINATION  
FORM A

REQUEST FOR PUPIL UNDER 11 YEARS ON 31ST AUGUST TO WRITE EXAMINATION

A: TO BE COMPLETED BY PARENT/GUARDIAN

Name of Primary School:.....

Pupil's Name: .....  
*BLOCK CAPITALS - SURNAME FIRST*

Date of Birth: .....  
*YEAR MONTH DAY*

Age on 31st August, 2019 .....

Name of Parent/Guardian  Mr.  Mrs.  Miss .....  
*BLOCK CAPITALS*

I hereby request that my \*son/daughter/ward named above write the Barbados Secondary Schools' Entrance Examination in May 2019.

**I am aware that \*he/she will be given only one opportunity to write this examination.**  
(\*Delete as applicable)

.....  
Signature of Parent/Guardian

Date:.....

FORMS TO BE COMPLETED AND RETURNED TO PRINCIPAL BY:

**Friday 18th January, 2019**

B: **TO BE COMPLETED BY PRINCIPAL AND RETURNED TO SENIOR EDUCATION OFFICER, EXAMINATION AND ASSESSMENT SECTION BY FRIDAY, 25TH JANUARY, 2019.**

I hereby **agree/\*do not agree** that this pupil has covered the relevant **syllabus** and is ready to write the Barbados Secondary Schools' Entrance Examination in May, 2019.

(\*Please delete as applicable and indicate reasons for disagreement on attached Sheet)

Name of Principal:.....  
*BLOCK CAPITALS*

Signature of Principal:.....

Date: .....