

APPLICATION: AD HOC (EMERGENCY) CONCESSION

This form is to be completed following an unforeseen event that results in a candidate needing additional support to successfully complete the SACAI NSC examination

PLEASE NOTE

- To be completed by SACAI registered institutions only.
- To ensure a speedy process, kindly ensure that this form is completed in full and all the required evidence is attached.
- Any form that has not been signed by both a parent/guardian and a representative of the SACAI registered institution, cannot be processed.
- An **application fee of R150.00** is payable. The institution will be invoiced for the application; no parent should pay SACAI directly.

1 INSTITUTION

2 CANDIDATE

Name and surname

Identity number

Grade

NATURE OF THE EMERGENCY

3

Dates / period that the emergency will necessitate additional support:

EVIDENCE ATTACHED (Please note that all documentation must be date specific.)

4

Doctor's letter

Affidavit (if deemed necessary)

Hospital admission/ discharge letter

Other (Please specify below)

SUPPORT REQUIRED

5

Additional time

Reader

Separate venue

Rest break

Scribe

Special placement

Other (please specify):

DECLARATION BY PARENT/GUARDIAN

6

I, the parent/guardian of the abovementioned candidate, herewith declare that the information provided on this form, as well as the evidence attached, is true and correct. I also note that any additional costs incurred because of the ad hoc concession (such as the use of a separate venue, the appointment of a reader/scribe, etc.) is for my own account.

Name and surname

Contact number

Signature

7	DETAILS OF THE PERSON AT THE SACAI REGISTERED INSTITUTION WHO COMPLETED AND SUBMITTED THIS FORM			
	Name and surname			
	Position			
	Contact details	Contact number		
		Email address		
Signature				

8	FOR SACAI OFFICE USE ONLY		
	Date received from institution:		
9	DECISION TAKEN BY THE SACAI		
	Request for ad hoc concession(s) approved:	YES	NO
	Reason if not approved		
	Additional feedback		
	Signed		
	SACAI	DATE	
10	FEEDBACK		
	Sent to:		
	Date:		