

## ADDENDUM B2 (CIRCULAR 0021 OF 2009): APPLICATION FOR CONCESSION(S): GRADE 9 EXAMINATIONS

LEARNER:  CONCESSION(S) for which applying:  TYPE OFCONCESSION  Additional time Spelling Handwriting Handwriting Handwriting Hadaptation of questions Amanuensis Braille Computer Dictaphone Enlarged print Internal papers Oral examination Reader Planning aid Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE:  DATE:  CELL PHONE:  FOR OFFICE USE: Approved/ Not approved:  Comments:	SCHOOL:			
TYPE OFCONCESSION  Additional time Spelling Handwriting Adaptation of questions Amanuensis Braille Computer Dictaphone Enlarged print Internal papers Oral examination Reader Planning aid Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE:  DATE:  FOR OFFICE USE: Approved/ Not approved:    DEATH   DEATH   DEATH   DEATH	EARNER:			
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Dictaphone Enlarged print Internal papers Oral examination Reader Planning aid Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  FOR OFFICE USE:  Approved/ Not approved:				
Enlarged print				
Internal papers				
Oral examination         Reader           Planning aid         Sign Language interpreter           Transcription of Braille         Tape aid           Video         Others           PRINCIPAL'S SIGNATURE:         DATE:           CELL PHONE:         FOR OFFICE USE :           Approved/ Not approved:	Enlarged print			
Reader Planning aid Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  CELL PHONE:  FOR OFFICE USE: Approved/ Not approved:				
Planning aid Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  CELL PHONE:  FOR OFFICE USE:  Approved/ Not approved:				
Sign Language interpreter Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  POR OFFICE USE:  Approved/ Not approved:				
Transcription of Braille Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  CELL PHONE:  FOR OFFICE USE:  Approved/ Not approved:				
Tape aid Video Others  PRINCIPAL'S SIGNATURE: DATE:  CELL PHONE:  FOR OFFICE USE:  Approved/ Not approved:				
Video Others  PRINCIPAL'S SIGNATURE:  DATE:  CELL PHONE:  FOR OFFICE USE:  Approved/ Not approved:				
Others  PRINCIPAL'S SIGNATURE: DATE:  CELL PHONE:  FOR OFFICE USE: Approved/ Not approved:				
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