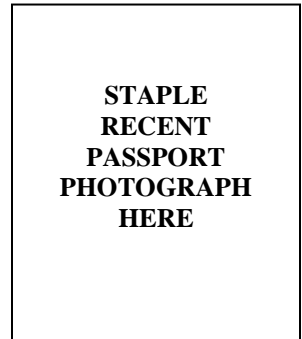


DECLARATION BY CANDIDATES
FORM D1

I
have read the rules and regulations governing the conduct of
the examination and I have agreed to be bound by them.
I hereby accept that the Council shall apply the relevant
penalties to me in case of a breach of any of the rules and
regulations, including those concerning mobile phones and
other communication devices.



.....
NAME OF EXAMINATION INVOICE NUMBER

.....
NAME OF CANDIDATE

.....
SIGNATURE DATE

.....
NAME OF WITNESS SIGNATURE OF WITNESS

STATUS AND ADDRESS OF WITNESS:

- NB:** * This form should be completed and signed by only the bona fide candidate for the examination in the presence of the witness.
* A recent passport photograph endorsed at the back and stamped at the bottom half of the photograph should be stapled in the box above.
* Witnesses may be prosecuted for any false declaration they make in respect of their status or the candidate's identity.