Address Amendment Form

 # Blacken as appropriate

Name of Examination

 # ○ LONDON EXAMINATIONS, G.C.E.

○ LONDON EXAMINATIONS, I.G.C.S.E. / G.C.S.E.

○ UNIVERSITY OF CAMBRIDGE, G.C.E.

○ UNIVERSITY OF CAMBRIDGE, I.G.C.S.E.

	Examination Series	**Year**			
#	**○ JANUARY**	**2**	**0**		
	○ MAY/JUNE	**2**	**0**		
	○ OCTOBER/NOVEMBER	**2**	**0**		

Centre No. | | | | | |

Candidate No. | | | | | |

Candidate Name in BLOCK LETTERS (Surname first; leave a blank box between names)

Postal Address (BLOCK LETTERS)

 # ○ HK ○ KLN ○ NT

Candidate Ind. | | **(S = School , P = Private)**

Signature : _____ **H.K.I.D. Card No.** : _____

Contact Tel No. : _____ **E-mail Address** : _____

Name : _____ **Date** : _____