

**ZIMBABWE SCHOOL EXAMINATIONS COUNCIL**

**APPLICATION FOR QUALIFICATION VERIFICATION e.g SAQA**

**To be completed by applicants requiring verification of qualifications and results.**

**INSTRUCTIONS**

1. Complete all sections of this form and attach your proof of payment.
2. Attach copies of your qualifications requiring verification where applicable.
3. All regional or international applications.
4. All payments should be made to the following ZIMSEC Account or made directly to ZIMSEC at the Examinations Centre in HARARE or any ZIMSEC Regional Office.

**CHARGES**

The following charges are applicable (the process can only begin after payment has been made);

* Local verification (Zimbabwe Only) **USD7.00 OR** **@ PREVAILING BANK RATE** per sitting.
* Regional verification (Outside Zimbabwe but within Africa) **USD60.00 OR @ PREVAILING BANK** per sitting.
* International verification (Outside Africa) **US80.00 OR @ PREVAILING BANK RATE** per sitting
* Search fees **US10.00 OR @ PREVAILING BANK RATE.** This is required in cases where the centre and the candidate numbers are not supplied.

**NOSTRO/FOREX ACCOUNT**

BANK CBZ

BRANCH CODE SELOUS AVENUE, HARARE, ZIMBABWE

SORT CODE 6109

ACCOUNT NAME ZIMBABWE SCHOOL EXAMINATIONS COUNCIL

ADDRESS UPPER EAST RD MOUNT PLEASANT, P.O BOX 1464 CAUSEWAY, HARARE

ACCOUNT NUMBER 02120520330117

SWIFT BIC CODE COBZZWHAXXX

INTERMEDIARY BANK BANK OF CHINA, BEIJING, CHINA

**SAQA REFERENCE NUMBER:**

**PROOF OF PAYMENT/RECEIPT NUMBER:**

Name of Applicant (**as used in the examination**)……………………………………………………………………

Surname………………………………………………………………………………………………………………………..

Date of Birth ………………………………………………………………………………………………………………….

National Registration Number………………………………………………………Phone #………………….………

Name of School/Examination Centre…………………………………………………Region……………..…………

Examination Centre Number…………………………………Candidate Number ………………………………….

Examination Level (e.g. ZGCE O Level)………………………………………………………………………………….

Month and Year of Examination (e.g. June 2001)…………………………………………………………………….

Please send a verification of my qualifications to SAQA using

 E-Mail

 DHL

 Registered mail

Forwarding Address:

**Foreign Qualifications and Advisory Services**

**SAQA House**

**1067Arcadia Street, Hatfield**

**Pretoria 0083**

**South Africa**

foreignawards@saqa.org.za

+27628834076

Signed……………………………………………………………………………………..Date……………………………..

**FOR OFFICIAL USE**

Received by…………………………………………………………….Date………………………………………………

Processed by…………………………………………………………..Date………………………………………………

Despatch Date…………………………………………………………................................................................