



MINISTRY OF EDUCATION
DIVISION OF EDUCATIONAL RESEARCH AND EVALUATION (D.E.R.E)
Telephone 624-2145 / 623-8464 / 627-9877

Application for Runner at National Examinations
(National Test and National Certificate of Secondary Education)

Name: _____
(First) (Last)

Address: _____

Telephone: _____ Mobile: _____ Email: _____

Date of Birth: _____
(Day) (Month) (Year)

Gender: Female Male

Are you still attending secondary school? Yes No

If yes, fill in the following:

Name of school: _____

Address of school: _____

Telephone: _____ Fax: _____

Highest level of Education: (e.g. Primary School Leaving, CSEC, CAPE etc.)

Experience working with Ministry of Education (National Tests/NCSE/CXC).
(Check all that apply)

Have you worked before? Yes No

Test(s): National Test NCSE CXC (CSEC/CAPE)

No. of years:
 1 year 2 years More than 2 years

Signature: _____ Date: _____

Please complete and submit by **5th June 2009** to: **Ministry of Education, Division of Educational Research and Evaluation, 18 Abercromby Street (1st Floor), Port of Spain.**