

MATSEC Examinations Board

Tel: +356 2340 2814/5/6 matsec@um.edu.mt

Request for Copies of Past MATSEC Examination Certificates

Personal Details			
Name and Surnam	_		
(as per time of exam	ination)		
Date of Birth			
School Attended			
Address			
(as per time of examination)			
Current Address			
Tel. / Mob. Numbe	er		
Examination:			
		Session and year	Level (SEC or Matriculation Certificate)
Examination:			Lauri (CEC an Matriaulation Contificato)
		Session and year	Level (SEC or Matriculation Certificate)
Examination:		Session and year	Level (SEC or Matriculation Certificate)
		Session and year	Level (SEC of Matriculation Certificate)
Examination:		Session and year	Level (SEC or Matriculation Certificate)
		Session and year	Level (320 of Watheulation Certificate)
Collection of Certificate:		☐ In person*	☐ By registered mail (€2.50)
		Appliant/a Cimphus	Date of Application
		Applicant's Signature	Date of Application
For Office Use			
Receipt Number			If collection is done in person
Amount Paid €			Applicant's Signature
	Certifica	ates: €20.00 per level	
Register		red mail €2.50	Date of Collection

^{*}Collection in person can be done by the applicant on the presentation of the applicant's ID card.