**TELT Examination – March 2025**

***(Request for Revision of Paper 10th – 16th April 2025)***

**The Director of Examinations**

**Examinations Department**

**Pinto Business Centre, Level 2**

**Mill Street**

**Qormi**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | I.D. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Index No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sir,

I would like to apply for a revision of paper of the above-mentioned examination.

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Signature of Candidate

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NAME IN BLOCK LETTERS

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| **Fee:**€35.00 | For Office use | *For Office use*Rec. No \_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Amount € \_\_\_\_\_\_\_\_Cashier \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |