

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

Examinations Registrar
Caribbean Examinations Council
[Address of CXC Office]
[City, State, Zip Code]

Dear Examinations Registrar,
Subject: Application for CXC Examination

I am writing to formally apply for the upcoming CXC examinations for the year [Year]. I am a student at [Name of School/Institution] currently enrolled in [Name of Program/Course] and will be sitting for the following subjects:

1. [Subject 1]
2. [Subject 2]
3. [Subject 3]
4. [Subject 4]

Please find attached the completed application form along with the required documents and payment receipt. I understand the importance of timely communication and have ensured that all materials are submitted before the deadline.

Should you require any further information or clarification, please feel free to contact me at the details provided above.

Thank you for your attention to my application. I look forward to your positive response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Typed Name]
[Your Student ID (if applicable)]