

APPLICATION FORM - IAL EXAMINATIONS OCT-NOV 2025



CRANBRIDGE INTERNATIONAL SCHOOL

Below is a list of the subjects you can opt for, for the **Oct/Nov 2025 Examinations**. Please indicate by marking **(v)** against the subjects required.

Unit Code	Subject	Confirmation	RM
WAC11	Accounting 1		920.00
WAC12	Accounting 2		920.00
WBI11	Biology 1		490.00
WBI12	Biology 2		490.00
WBI13	Biology 3		490.00
WBI14	Biology 4		490.00
WBI15	Biology 5		490.00
WBI16	Biology 6		490.00
WBS11	B. Studies 1		600.00
WBS12	B. Studies 2		600.00
WBS13	B. Studies 3		600.00
WBS14	B. Studies 4		600.00
WCH11	Chemistry 1		490.00
WCH12	Chemistry 2		490.00
WCH13	Chemistry 3		490.00
WCH14	Chemistry 4		490.00
WCH15	Chemistry 5		490.00
WCH16	Chemistry 6		490.00
WEC11	Economics 1		600.00
WEC12	Economics 2		600.00
WEC13	Economics 3		600.00
WEC14	Economics 4		600.00
WDM11	Dec Math 1		490.00
WME01	Mechanics 1		490.00
WME02	Mechanics 2		490.00
WME03	Mechanics 3		490.00
WST01	Statistics 1		490.00
WST02	Statistics 2		490.00
WST03	Statistics 3		490.00
WFM01	Further Pure 1		490.00
WFM02	Further Pure 2		490.00
WFM03	Further Pure 3		490.00
WMA11	Pure Math 1		490.00
WMA12	Pure Math 2		490.00
WMA13	Pure Math 3		490.00
WMA14	Pure Math 4		490.00

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WPH11	Physics 1 New		490.00
WPH12	Physics 2 New		490.00
WPH13	Physics 3 New		490.00
WPH14	Physics 4 New		490.00
WPH15	Physics 5 New		490.00
WPH16	Physics 6 New		490.00

NUMBER OF PAPERS () X RM 920.00	RM
NUMBER OF PAPERS () X RM 600.00	RM
NUMBER OF PAPERS () X RM 490.00	RM
TOTAL PAYABLE	RM
MODE OF PAYMENT	CASH / CHEQUE / ONLINE TRANSFER
BANKING DETAILS Bank: HONG LEONG BANK Account Holder: CRANBRIDGE EDUCATION GROUP SDN BHD Account Number: 04601007611 Reference : IAL Oct/Nov 2025 CHEQUE PAYABLE TO CRANBRIDGE EDUCATION GROUP SDN BHD Please email proof of payment to: exam@cranbridge.edu.my	

Candidate Declaration

- I understand that I shall be allowed to sit only for those subjects and papers for which I have entered on this form.
- I agree that there will be no postponement or refund of all fees should I decide to withdraw from the examination after registration.

Signature of Candidate/ Parent : _____ Date : _____

Candidate Name : _____

FOR OFFICE USE ONLY

Received by :

Date : Receipt No :