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01 March 2024  
Att: Liyanda Handula  
Masihuthuke Learning Institution  
3 Cedar Road  
Cnr Cedar and Blackwood Streets  
Bryanston  
2191

Dear Mr Handula

### **REGISTRATION AS AN IEB EXAMINATION PROVIDER FOR AET ASSESSMENTS**

I hereby acknowledge receipt of your application to register as an IEB examination provider for AET assessments in 2024.

I am pleased to inform you that your registration has been approved. The Provider number allocated to you is:

**7020**

Please ensure that you quote your provider number in all correspondence with the IEB.

According to the registration form submitted by you, examination scripts will be delivered to 3 Cedar Road, Cnr Cedar and Blackwood Street, Bryanston, 2191.

Should you have any queries regarding the above; please contact me on (011)483 9727 or at [NundkumarS@ieb.co.za](mailto:NundkumarS@ieb.co.za).

Yours sincerely

**Sharona Nundkumar**  
**Senior Manager: Entry & Resulting**