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**Tertiary and Vocational Education Commission (TVEC)**

**Course Information for Common Written Examination Level 5 & 6**

Name of the Institution:

Address:

TVEC Registration No:

Telephone No: Email Address:

Contact Person: Name Tel. No

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| **Course Name** | **Module Name** | **NVQ Level**  **5 /6** | **Semester**  **1/II** | **No of Candidates** |
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