

For office use only

Reçu n°

Ref:



AMBASSADE DE FRANCE A LONDRES

INSTITUT FRANÇAIS

CENTRE INTERNATIONAL D'ETUDES PEDAGOGIQUES (CIEP)



Attach
photograph in
this box

Test required:

(Compulsory plus optional tests are necessary if entry is for Test d'accès exemption or Insead language requirements)

TCF TOUS PUBLIC:	Compulsory £ 85 <input type="checkbox"/>	Optional £ 75 <input type="checkbox"/>	Optional + compulsory £ 145 <input type="checkbox"/>
TCF Quebec	£ 115 <input type="checkbox"/>	TCF pour l'accès a la nationalité Française	£ 115 <input type="checkbox"/>

Reason for entry:

Self – assessment <input type="checkbox"/>	Sciences-Po. <input type="checkbox"/>	Immigration <input type="checkbox"/>	Other <input type="checkbox"/>
Insead <input type="checkbox"/>	University entrance <input type="checkbox"/>	Nationality <input type="checkbox"/>	

CANDIDATE DETAILS (Please write in block capitals)

Surname:	Forename (s):
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/>	Date of birth (dd/mm/yyyy):
Town of birth:	Country of birth:
Nationality:	Mother tongue :
Email:	Telephone :
Permanent address for correspondence:	Temporary address (if applicable):
.....	Until (please give date):
.....
Postcode.....	Postcode.....
County/country	County /Country
Previous candidate number (if applicable): _____	

Please note:

There must be a gap of 60 days before a re-sit.

PLEASE TICK THE EXAM DATE REQUESTED:

Date	Deadline	TCF Tout Public	TCF Québec	TCF pour l'accès à la nationalité française
Friday, 17 February	1 February			
Friday, 24 February	3 February			
Friday, 30 March	1 March			
Friday, 27 April	1 April			
Friday, 25 May	1 May			
Friday, 22 June	1 June			
Friday, 20 July	1 July			
Friday, 28 September	1 September			
Friday, 26 October	1 October			
Friday, 30 November	1 November			
Tuesday, 18 December	27 November			

Payment:

Cheques and postal orders are payable to “IFRU Régie de Recettes”.

By cheque	<input type="checkbox"/>	This form must be returned to: Language Centre TCF examinations 14 Cromwell Place LONDON SW7 2JR
By postal order	<input type="checkbox"/>	
By card	<input type="checkbox"/>	
By cash	<input type="checkbox"/>	

IMPORTANT

DECLARATION BY CANDIDATE – PLEASE READ CAREFULLY BEFORE SIGNING

1. I understand that the fee is non refundable and cannot be transferred to a future examination session.
2. It is the candidate's responsibility to check that their names and details are correct on the confirmation of enrolment, as they appear on their passport. The same details will appear on the attestation.
3. Once set, the schedule of oral examination dates and times may not be altered.
4. Candidates should arrive at the time indicated on the notification of examination timetable, which they will be receiving by post, and wait at the reception desk until the teacher or the coordinator drive them to the examination class. Late arrivals will **NOT** be accommodated.
5. Oral examinations may be taken late in the evening. There may be a long gap between a candidate's written and oral examinations. I understand that my oral examination will be recorded.
6. Candidates will be required to bring official proof of identity on their examination day and the notification of examination timetable. Only passports, national ID cards and photo driving licenses will be accepted. Failure to produce one of the above-mentioned cards will deny candidates access to the examination room.
7. Results are due **four to six weeks after the examination day**. Candidates will be informed by email when we will receive the results. **No scores will be given by email or phone to candidates.**
8. "Attestations" must be collected by the candidate at the examination centre within 4 weeks of notification and with official proof of identity. **No certificate will be sent directly to candidates by post.**
9. I understand that exam dates may be subject to alterations or cancellations in cases of *force majeure*. Due to insufficient number of candidates, the Institute reserve the right to cancel the exam.

PLEASE WRITE BELOW: "I agree to be bound by the regulations for the TCF examinations"

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Date:

Signature: