

Candidate test day photo registration and consent form

Centre Name:	Nelson Marlborough Institute of Technology
Centre Number:	NZ003
Centre Address:	322 Hardy St, Nelson, 7010
Centre Contact:	Soraya Paki Paki, phone 03 539 5063

Use this form if you are 17, or under 17, years of age.

Exam details:

Which exam do you want to take?

<i>Cambridge English: First (FCE)</i>
<i>Cambridge English: Advanced (CAE)</i>
<i>Cambridge English: Proficiency (CPE)</i>
<i>Other Examination:</i>

Paper-based	Computer-based

On which date do you want to take the exam

Identification (ID): If you are taking Cambridge English: Advanced in the UK, Asia, Africa and Australasia you must record the type of acceptable photo ID used to register for the exam and bring the same ID back for each Exam component otherwise you will not be allowed to sit the exam. Your ID must be current (not expired) and have a photograph.

ID type that you will bring to the exam

ID number (e.g. if bringing your passport, what is the passport number):

Expiry date of the ID listed above:

Your details:

First name(s): Family name(s):

These names must be the same as the names on your passport/National Identity Card and must appear in the same order

Date of birth: Gender: Male Female

Email:	<input type="text"/>		
Phone number:	Mobile/cell phone number:	<input type="text"/>	
Address:	City/town:	<input type="text"/>	
	Post/zip code:	<input type="text"/>	
	Country:	<input type="text"/>	

This is the address that your certificate will be sent to. If you want your centre to send it to a different address, please contact the centre directly.

Name of institution where you are doing a Cambridge English exam preparation course (leave blank if you are not doing a course):

Why are you taking the test?

For studying abroad	<input type="checkbox"/>	In which country?	<input type="text"/>
For work	<input type="checkbox"/>	Other	<input type="text"/>

Do you have any special requirements? For example, modified materials for visual difficulties, or special requirements because of a medical condition.

Declaration:

I am the parent/legal guardian of the candidate named on this form and I give consent to this person taking the Cambridge English exam selected above.

I understand that all individuals who want to take a Cambridge English exam are required to agree to all of the Terms and Conditions (a copy of which has been provided by the centre).

I agree to the candidate being admitted for the selected Cambridge English exam at the centre listed on this form and for the date listed here. The candidate will bring a valid photo ID with them on the test day, and I consent to having their photo taken by the centre on the day of the Speaking test and/or the written papers. I agree for this photo to be held on the secure Cambridge English Language Assessment Results Verification site and viewed as set out below if I give my agreement on behalf of the candidate.

The photo shall only be available to organisations/individuals that I agree to Cambridge English Language Assessment giving the candidate's details to or authorize to view the candidate's result.

By signing this form I declare that I am aware of and agree to comply with the Terms and Conditions for this exam.

	Signature	Date
Parent/Guardian		
Signature of candidate		