ALIST Professional Education

ETS TOEFL Junior ETS TOEFL Primary

TOEFL Junior / TOEFL Primary Registration Form

Please fill out this form as completely as possible in English. All required fields must be completed. Please use capital letters.

*Last (Family/Surname) Name:

*First (Given) Name:

Middle Name or Middle Initial:

Address:

_____

_____

_____

*Date of Birth: (MM/DD/YY)

*Mobile no:

*Gender: ◯ Male ◯ Female

*ID Card no: / Passport no:

*Email address: _____

Education History:

Where is the applicant currently studying? _____ Current grade/year level: _____

How many years of English Language has the applicant studied? _____ Years

Has the applicant completed a TOEFL Primary or equivalent? ◯ Yes ◯ No Score: _____

I would like to take a test: The applicant must be registered 7 days prior to the test date.

◯ TOEFL Junior ◯ TOEFL Primary

Test Date: Sat. _____ Session: ◯ 9.30am-11.00am ◯ 1.00pm-2.30pm ◯ _____

Test Date: Sun. _____ Session: ◯ 9.30am-11.00am ◯ 1.00pm-2.30pm ◯ _____

Method of payment:

◯ Test fee for TOEFL Junior: Bt. _____ ◯ Test fee for TOEFL Primary: Bt. _____

Paid by: ◯ Cash ◯ Transfer Amount: Bt. _____ Payment date: _____

Please note that fees are subject to change.

I understand the following:

1. The application process will not commence until the application form is complete and all necessary supporting documentation is provided to the Center. Copies of the following original documents must be provided;

☐ A copy of ID Card or Passport.

☐ TOEFL Primary, TOEFL, IELTS or equivalent test (if applicable) English language proficiency test results

2. No refunds will be entertained for all cases once payment has been made.

Parent's signature: _____ Tel.: _____ Date: _____

Applicant's signature: _____ Tel.: _____ Date: _____

Please note that : IF YOU FORGET TO BRING YOUR ID CARD OR PASSPORT OR ANY DOCUMENTATION TO IDENTIFY YOURSELF, YOU AREN'T PERMITTED TO TAKE THE TEST FOR ALL REASONS.

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