

To: YLE Administrator
British Council, Warsaw
Fax: 022 695 59 30 / 022 621 99 55

Exam Centre: PL 002

date: _____

PLEASE PRINT:

Name of school:

School address:
 (incl. post code)

Phone number:
 (incl. area code):

Fax number:
 (incl. area code):

E-mail:

Contact phone number on the day of the test::

We would like to register children for the following tests:

TEST	NUMBER OF CHILDREN	NUMBER OF ROOMS FOR A WRITTEN	DATE OF TEST:
<i>Starters</i>			
<i>Movers</i>			
<i>Flyers</i>			

The school will provide rooms (at least one per each level + a waiting room for the oral component) for the YLE tests with seating arrangements adhering to Cambridge ESOL requirements (candidates seated 1.25m. apart in all directions with a space between rows for invigilation).

The address of the test venue (if different from above) is (PLEASE PRINT):

street & number:

town & code:

phone & code:

The school will ensure that:

1. CD players are available in all examination rooms where listening tests are to be held;
2. candidates bring crayons (colours specified in the YLE syllabus), pencils, erasers and pencil sharpeners on the day of the test;
3. a school representative is present during the whole test day. The person plays the role of an usher during Speaking section of the test;
4. a waiting room for parents is arranged in such a way that parents do not enter the examination area throughout the whole YLE test;
5. a completed YLE Registration Form - with dates of birth and signatures of parents – is faxed to the YLE Administrator at the British Council Warsaw no later than 3 weeks prior to the test date;
6. the original YLE Registration Form with hand written signatures of parents is delivered at the latest on the day of the test to the YLE examiners.

I confirm that the following have been made known to me:

1. the responsibilities of an usher
2. fees per candidate
3. minimum numbers of candidates per level required for registration
4. method and time of payment

Name (PRINT): _____ Signature: _____