You will appreciate that the arrangements which the Tallinn University **Centre for International Examinations** has made need to be accurate and formalized in order to make sure that the examination is correctly administered. Therefore, in order to be registered please send us:

REGISTRATION DETAILS:

|  |  |
| --- | --- |
| **Examination and Date** |  |
| For Identification |
| First name (as in passport/ID document) |  |
| Last name (as in passport ID document) |  |
| Sex | [ ] Male [ ] Female |
| Date of Birth (dd/mm/yyyy) |  |
| Personal identification code |  |
| Passport no / ID number |  |
| For Certificate Delivery |
| Full Postal Address (including postcode) |  |
| For Operational Contact |
| Mobile phone number |  |
| E-mail address |  |

**By submitting the registration form I confirm that I have acquainted myself with the terms of taking the test**

* **I have read the** [**Terms and Conditions**](https://www.tlu.ee/en/cambridge-terms-and-conditions) **on centre’s website.**
* **I** **notify the centre during the registration process or as soon as possible of disability, medical conditions or special requirements** (incl. use of wheelchair; pregnancy etc.) **in order that the centre can accommodate the needs.**
* **I comply with the Cambridge Assessment English examination regulations and with the arrangements made by the Local Secretary of the above Centre.**
* **I have my photograph taken on the examination day**

(for First/Advanced/Proficiency)

* **I pay the appropriate examination fee to your bank account and send the payment confirmation to your email together with the registration form.**

Account Name: Tallinna Ulikool

Details of Payment: Name of the candidate, Name of exam, Exam date,

Bank Name: Swedbank

IBAN: EE792200221006107980

SWIFT: HABAEE2X

* **I accept that the fee is not refundable unless the ability to sit the test has been affected by illness or serious cause (you need to inform the centre as soon as possible).**

|  |  |
| --- | --- |
| **Date** | **Handwritten or digital signature**  |
|  |  |

**For non-adult candidate parent / legal guardian only**

|  |  |  |
| --- | --- | --- |
| **Date** | **Full name** | **Handwritten or digital signature**  |
|  |  |  |

**Please send the completed and signed registration form as well as payment confirmation electronically to:**

[gerdel-gris.viil@tlu.ee](file:///C%3A%5CUsers%5Cgerdel%5CDesktop%5CDesktop%5CCambridge%5CCambridge%20English%20eksamid%5Cgerdel-gris.viil%40tlu.ee)

We will confirm paid registrations within 7 days. Please **do not** send the form multiple times.

**Do you have a disability or special requirements?**

We have a number of ways to help people taking our exams who need special arrangements due to temporary or long term difficulties or conditions. For example, special arrangements might be available for you if you have a broken arm, or you have a long term illness, or a specific learning difficulty. Please get in touch with your exam centre ASAP who can advise you.

Specific advice is available below for:

* visual difficulties
* hearing or speaking difficulties
* learning difficulties.

Please let us know if you are a wheelchair user or if you are pregnant in order for us to be able to accommodate you as not all rooms are suitable and adjustable.

Please let us know if you have a serious case of diabetes. If you monitor your blood sugar with a mobile then please keep in mind that electronic devices are not allowed in the exam room and must be switched off before the start of the exam.

**Receiving your certificate**

Certificates are sent to the centres within 3 months of the exam.

When the certificates have arrived in our centre we will inform you via email. Certificate can be collected from our office free of charge or we can send it to you via registered mail (fee 5€).