**VTCT (iTEC) ESOL International Examinations |** SCHOOLS REGISTRATION FORM

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| --- | --- |
| Exam Period: | Exam Type: Paper Based Computer Based  |
| School Unique Code: \_\_\_\_\_\_\_\_\_\_\_ | **School Name:** | **Owner’s Name:** |
| VAT No: | **Tax Office:** | **City/Area:** |
| Address: | **Postal Code:** |
| Telephone: | **Mobile:** | **E-mail:** |
| Bank Name: | **IBAN:** | **Beneficiary Name:** |

Tick **✓** the exam you wish to register candidates for:

|  |  |  |  |
| --- | --- | --- | --- |
|  | VTCT (ITEC) Entry Level Certificate in ESOL International (Entry 3) (B1) |  | VTCT (ITEC) Level 1 Certificate in ESOL International (B2) |
|  | VTCT (ITEC) Level 2 Certificate in ESOL International (C1) |  | VTCT (ITEC) Level 3 Certificate in ESOL International (C2) |

Please, fill in candidates’ names in CAPITAL LETTERS and LATIN CHARACTERS according to ELOT as they appear on their ID or passport:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **First Name** | **Family Name** | **Father’s name** | **Date of birth** | **ID/Passport No.** | **Telephone No. (mandatory)** | **E-mail address (mandatory)** |
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|  |  |  | \_\_ / \_\_ / \_\_\_\_ |  |  |  |

I undertake a warrant that I, the signatory person,

 am legally entitled to submit the above personal data and the relevant documentation to European Consulting, bearing all legal liability and I fully consent for every necessary use of them, i.e saving in digital file or hard copy or/and forwarding to VTCT or any other third party, for the cause of registration and participation in the VTCT (iTECT) ESOL Examinations.

 By sending this candidate list, I declare that I have been informed of the company's commercial policy and its receipt on behalf of the company indicates the fulfillment of the contractual obligations to its second party, as they result from the commercial policy, which is located in the field “partners” on European Consulting’s website.

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| **Name of Administrator** |  | **Signature/Stamp** |  | **Date** | \_\_ / \_\_ / \_\_\_\_ |