



For office use only

Centre: Alliance Française de Milton Keynes

PRIM / JUNIOR

Numéro de reçu:

Code candidat:

Session:

Niveau(x): A1.1 A1 A2

**AF Milton Keynes
DELF PRIM or JUNIOR 2022 - ENROLMENT FORM**

IMPORTANT: please write legibly and fill in ALL boxes. Any missing / illegible personal detail may result in the cancellation of your application.

1. Candidate details (please write in block capitals)

| | | | | |
|---|--|----|----|------|
| Family name (as per the candidate's passport) | First name(s) IN FULL (as per the candidate's passport) | | | |
| Gender: M [] F [] | Date of birth (DD/MM/YYYY) | DD | MM | YYYY |
| Town of birth: | Country of birth: | | | |
| Nationality: | Second nationality (if applicable): | | | |
| Parents/guardians' email: | Permanent address for correspondence: | | | |
| Parents/guardians' phone number (mobile): | | | | |
| Mother tongue: | | | | |

2. Has the candidate ever been registered for a DELF exam (even if they didn't sit the

No [] Yes []

If you have answered yes, please provide the candidate's existing candidate number here below

| Level | Date | Country/centre | Candidate number (found on correspondence with(12 digits) |
|-------|------|----------------|--|
| | | | |

3. Examination entry (please tick x)

| | Date | Fees per level | Please tick |
|----------------|------------|----------------|-------------|
| DELF PRIM A1.1 | 18/06/2022 | £GB 50 | |
| DELF PRIM A1 | 18/06/2022 | £GB 55 | |
| DELF PRIM A2 | 25/06/2022 | £GB 60 | |
| DELF JUNIOR B1 | 21/05/2022 | £GB 105 | |

IMPORTANT**DECLARATION BY CANDIDATE - PLEASE READ CAREFULLY BEFORE SIGNING**

1. I understand that the fee is **non refundable** and **non transferrable** to a future exam session.
2. I confirm my name and details are exactly as they appear on my passport and written as legibly as possible. Any
3. I understand that this registration will only be complete when payment has been processed.
4. I agree to collect and sign for any results certificate and diploma awarded to the candidate at the examination centre, within two weeks of notification. **NO CERTIFICATE / DIPLOMA WILL BE SENT DIRECTLY TO CANDIDATES BY POST.**
5. I agree to inform the examination centre in writing should any of the candidate's details change during the examination period, from enrolment to the arrival of diplomas.
6. I understand that oral examinations may take place early / late in the day, that there may be a long gap between the oral and the written examination, and that the oral exam may be on a different day to the written exam. I understand that the oral exam may be recorded.
7. I understand that, once set by the examination centre, the oral examination time will not be changed.
8. I understand that exam dates may be subject to alterations or cancellation in all cases of *force majeure*.
9. I understand that all requests for diploma reprints will incur an administrative fee of £15.

I AGREE TO BE BOUND BY THE REGULATIONS FOR THE DELF/DALF EXAMINATIONS

Candidate's signature:

Date:

Parents' / guardians' signature:

Parents' / guardians' full printed names

4. Payment

Bank transfer: Alliance francaise de Milton Keynes/ BARCLAYS/ sort code: 20-57-40/ Account number: 70930318
(please make sure to use your name, DELF and the level you need as reference)