



Registration Form

Please complete this form using **BLOCK CAPITALS**

A. Candidate Details



PHOTO

1. Name: _____

2. Date of Birth: _____ / _____ / _____ Sex: **Male** _____ **Female** _____
day month year (tick mark as appropriate)

3. Address for Correspondence: _____

Telephone: _____ Mobile: _____

Email: _____

4. Nationality: _____ Mother Tongue: _____

5. ID Document (Any one)

Passport Number: _____

Citizenship Number: _____

Student ID Number: _____

6. Class: _____

7. School Name and Address: _____

Telephone: _____

B. Examination Details

1. Young Learners English, Starters (YLE) Centre

2. Young Learners English, Movers (YLE) Examinations

3. Young Learners English, Flyers (YLE) Examinations

C. Preferred Date

(a) First Choice: _____ / _____ / _____
day month year

(b) Second Choice: _____ / _____ / _____
day month year

I hereby certify that the information on this form is complete and accurate to the best of my knowledge.
 I understand that I must abide by the rules and regulations laid down by Universal Language and Computer Institute (Test Center NP008).

Signature: _____ Date: _____

Universal Language and Computer Institute takes all reasonable steps to provide continuity of service. You will understand that we cannot be held responsible for any interruptions caused by circumstances beyond our control. If examinations or their results are disrupted, cancelled or delayed, every effort will be made to resume normal services as soon as possible.