Immagine che contiene schermata, testo, schermo, software

Descrizione generata automaticamente

**Gatehouse Awards Classic** **Examination Application Form**

|  |  |
| --- | --- |
| **CENTRE DETAILS** |  |
| Centre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Centre code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Examination Coordinator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Contact Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email for examination materials receipt: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Please note that all examination materials will be sent to the registered Gatehouse Awards center delivery address.** | |

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| **EXAM DATE: DD/MM/YYYY** |  | **PAPER-BASED** | **ONLINE CENTRE-BASED** | **ONLINE REMOTELY OBSERVED** |

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| --- | --- | --- | --- | --- | --- | --- |
| **Exam Level (4 units)** | **A1** | **A2** | **B1** | **B2** | **C1** | **C2** |
| **Number of Candidates**  **STANDARD** |  |  |  |  |  |  |
| **Number of Candidates**  **FAST TRACK** |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Exam Level (resits)\*** | **A1** | **A2** | **B1** | **B2** | **C1** | **C2** |
| **Number of Candidates**  **STANDARD** |  |  |  |  |  |  |
| **Number of Candidates**  **FAST TRACK** |  |  |  |  |  |  |

**\*specify the unit and the number of candidates, e.g. for 2 writing test resits, write 2W.**

|  |  |
| --- | --- |
| **Oral Examiner Service** | **YES**  **NO**  **(fees applied:** **€ 150 plus travel expenses)** |

***Please return the exam application form along with the candidate spreadsheet***

***(instructions on next page)***

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Please complete and submit a GA Exam Candidate Spreadsheet listing the required details of candidates who will sit the examination.

Leave the candidate number field blank.

In the given name column, enter the name and middle name if applicable.

In the family name column, enter the surname.

Enter the date of birth in DD/MM/YYYY format.

Complete separate spreadsheets for different levels.

No further notes or comments allowed in the spreadsheet.

No special characters such as .,\-();@!#{}" etc. allowed in any place.

|  |  |  |  |
| --- | --- | --- | --- |
| candidate\_number | given name | family name | dob |
|  | MARIA GRAZIA | RICCI | 24/07/1982 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*Sample spreadsheet*