



Alliance Française

Jersey

CENTRE INTERNATIONAL D'ETUDES PEDAGOGIQUES (CIEP)

**TCF  
ENTRY FORM  
2020**

**Attach  
photograph in  
this box**

**Test required:**

|   |   |  |
|---|---|--|
| <b>TCF TOUS PUBLIC:</b>                   | Compulsory £ 139 <input type="checkbox"/>                           | Speaking £ 79 <input type="checkbox"/> |
|   |   | Writing £ 79 <input type="checkbox"/>  |
| <b>TCF Québec:</b>                        | Listening Comprehension £ 79 <input type="checkbox"/>               | Speaking £ 79 <input type="checkbox"/> |
|   | Reading Comprehension £ 79 <input type="checkbox"/>                 | Writing £ 79 <input type="checkbox"/>  |
| <b>TCF DAP</b>                            | Compulsory £ 139 <input type="checkbox"/>                           |  |
| <b>TCF Pour l'accès à la nationalité:</b> | Listening Comprehension and Speaking £ 139 <input type="checkbox"/> |  |

**Reason for entry:**

|  |  |                                      |                                |
|--|--|--------------------------------------|--------------------------------|
| Self – assessment <input type="checkbox"/> | Sciences-Po. <input type="checkbox"/>        | Immigration <input type="checkbox"/> | Other <input type="checkbox"/> |
| INSEAD <input type="checkbox"/>            | University entrance <input type="checkbox"/> | Nationality <input type="checkbox"/> |                                |

**CANDIDATE DETAILS** (Please write in block capitals)

|   |   |
|---|---|
| Family name:  | First name (s)<br>in FULL as per your passport: |
| Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> | Date of birth (dd/mm/yyyy):                     |
| Occupation:   | Country of birth:                               |
| Nationality:  | Mother tongue :                                 |
| Email:  | Telephone :                                     |
| Address for correspondence:<br>.....<br>....Postcode: .....<br>City: .....                  |   |

**Please note:**

There must be a gap of 30 days before a re-sit.

**PLEASE TICK THE EXAM DATE REQUESTED:**

| Date                             | Deadline at 3.00pm        | TCF DAP | TCF Tout Public | TCF Québec | TCF pour l'accès à la nationalité française |
|----------------------------------|---------------------------|---------|-----------------|------------|---|
| Friday 14 <sup>th</sup> February | 14 <sup>th</sup> January  |         |                 |            |   |
| Friday 20 <sup>th</sup> March    | 20 <sup>th</sup> February |         |                 |            |   |
| Friday 24 <sup>th</sup> April    | 24 <sup>th</sup> March    |         |                 |            |   |
| Friday 22 <sup>th</sup> May      | 22 <sup>th</sup> April    |         |                 |            |   |
| Friday 26 <sup>th</sup> June     | 26 <sup>th</sup> May      |         |                 |            |   |

**Payment:**

By cash or bank transfer after sending the form to info@afjersey.com

|                  |                          |
|------------------|--------------------------|
| By cash          | <input type="checkbox"/> |
| By bank transfer | <input type="checkbox"/> |

Please put "exam name/the candidate's surname" as the reference when making the transfer.

**Account name:** Alliance Francaise de Jersey

**Sort Code:** 40-25-34

**Account number:** 81328638

**Bank:** HSBC

Thank you for confirming by email when payment is confirmed.

**Please note that if the bank transfer is received after the deadline, we will not be able to register you for your chosen exam.**

**IMPORTANT**

**DECLARATION BY CANDIDATE – PLEASE READ CAREFULLY BEFORE SIGNING**

1. I understand that the fee is non refundable and cannot be transferred to a future examination session.
2. It is the candidate's responsibility to check that their names and details are correct on the confirmation of enrolment, as they appear on their passport. The same details will appear on the certificate.
3. Once set, the schedule of oral examination dates and times cannot be altered.
4. Candidates should arrive at the time indicated on the notification of examination timetable, which they will receive by email, and wait at reception until their examination is due. Late arrivals will NOT be accommodated.
5. Oral examinations may be taken in the early morning or late in the evening. There may be a long gap between a candidate's written and oral examinations. I understand that my oral examination will be recorded.
6. Candidates will be required to bring official proof of identity on their examination day and the notification of examination timetable. Only passports, national ID cards and photo driving licences will be accepted. Failure to produce one of the above-mentioned forms of identity will deny candidates access to the examination room.
7. Results are due six weeks after the examination day. Candidates will be informed by email when we receive the results. No scores will be given by email or phone to candidates.
8. Certificates must be collected by the candidate at the examination centre within 4 weeks of notification and with official proof of identity. No certificate will be sent directly to candidates by post or by email.
9. I understand that exam dates may be subject to alterations or cancellations in cases of *force majeure*. Due to insufficient number of candidates, the Institut français reserves the right to cancel the exam.
10. Any certificate reprint will incur a charge of £10.

**"I agree to be bound by the regulations for the TCF examinations"**

**Date:**

**Signature:**