



**英國劍橋大學英語中級校園版 2015 年報名表**

Cambridge English: PET for school Registration Form 2015

<p>考試級數 Levels <input type="checkbox"/> PET for school</p>	<p>考試日期 Date of Examination</p>	<p><input type="checkbox"/> 2015.06.25 (四) 報名截止日期：2015.06.01 (一) <input type="checkbox"/> 2015.11.14 (六) 報名截止日期：2015.10.12 (一)</p>	
<p>中文姓名 Chinese Name _____</p>		<p>英文姓名 English Name (與護照同) _____, _____</p>	
<p>聯絡資料</p>	<p>手機 Mobile _____</p>	<p>Date of Birth</p>	<p>____ Date ____ Month ____ Year</p>
	<p>(H)</p>	<p>E-mail _____</p>	
	<p>聯絡地址 □□□□ Address _____</p>		
<p>報名方式 Registration</p>	<p><input type="checkbox"/> 個別報名 Individual      <input type="checkbox"/> 團體報名 Group _____ (學校、機構、公司行號) School, Organization, Corporation</p>		
<p>特殊安排 Additional Arrangement</p>	<p>考生如因身體不適或藥物治療而需特殊安排，請在此列明要求。考生必須連同醫生證明文件一併交回。Do you have any additional needs due to ill health / medical condition? If yes, please specify your requirements below. You must attach supporting medical evidence to this form.</p>		
<p>聲明 Declaration</p>	<p>本人確認此表格內的資料均為詳實及正確。本人明白如本人提供任何不正確或虛假資料，本人的報名表將不受理。本人明白考試通知將於考試前一星期送達。如本人在考試前三天仍未收到通知，本人應立即聯絡考試服務。本人已了解並同意，考試經受理後，無法更改考試日期。 I confirm that the information on this form is complete, true and accurate. I understand that if false or incorrect information is given, the processing of my application may be revoked. I understand that an e-mail confirming the examination time will be sent ONE WEEK before the examination. If I do not receive the e-mail THREE DAYS before the examination, I will have to contact Examinations Services immediately. Change of examination date and time is not permitted.</p> <p>本人同意華岡興業基金會於口試或筆試當日為本人或考生拍照存檔，本人亦同意將有關照片與考試成績並列於劍橋大學外語考試局成績核證網頁內，供本人同意的院校、僱主或機構下載及查核。 I consent to have my/the candidate's photo taken by the Hwa-Kang Xing-Ye Foundation on the day of the written paper(s) and/or the Speaking test. I agree for this photo to be held on the secure Cambridge ESOL Results Verification site, and the photo shall only be available to organizations/individuals that I give my/the candidate's details to or that I authorize to view my/the candidate's result via a download. I consent that these organizations/individuals can use these details to verify my/the candidate's examination result.</p> <p>考生/ 家長或監護人簽署 _____ Signature of candidate / parent or guardian _____</p> <p>日期 Date _____</p>		

請浮貼護照或身份證正面或健保卡正面影印本

(Please attach a copy of your ID or passport here.)

未貼影印本者恕不受理報名

請浮貼繳費收據影印本

請貼六個月內正面半身二  
吋相片二張

(一張浮貼)

Attach photo here