



Registration Form DELF/DALF 2020 (JUNIOR) (SPRING SESSION)



Alliance Française
Singapour

Please submit this form to Alliance Française de Singapour, 1 Sarkies Road, Singapore
258130 Tel: 6737 8422

On the following dates only

17 FEBRUARY – 14 MARCH 2020

Please fill in the following information in capital letters, clearly and carefully. Please take note that full name, birth date, place of birth and nationality will appear on the diploma. Diploma re-edition is subject to administrative fees of \$65.

Last Name (Family Name / Surname) (Compulsory Field / C.F.)	First Name (Given Name) (C.F.)	<input type="checkbox"/> Mr <input type="checkbox"/> Ms IC / FIN No : (C.F.)
Nationality (C.F.)	Date of Birth (C.F.) _____ (day/month/year)	Place of Birth City : (C.F.) Country : (C.F.)
School / Institution of origin (where did you learn French) : (C.F.)		
Address (C.F.)	Postal Code	Mobile number : Home number : E-mail : (C.F.)

Student at Alliance Française de Singapour : Yes [] No [] **(C.F.)**

[] First timer, if not, please fill in the registration number:

Registration number

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Compulsory for candidates who have previously taken DELF/DALF. The last 4 digits can be found on the front at the bottom left corner of the diploma.

A1	A2	B1	B2
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Fees : \$110 \$110 \$165 \$165

Test Dates :
(18 May) (19 May) (20 May) (21 May)

Fees are inclusive of GST

We accept NETS, Visa/Master, AMEX, Cash only

For Office use only

Total amount paid \$ _____

Receipt No: _____

Please read the Terms & Conditions and acknowledge



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Please note the following Terms and Conditions for DELF-DALF exam registration.

It is the candidate's responsibility to fill in the form with accurate and legible information.

Any reedition of diploma is subject to an administrative fee of S\$65.00.

For postponement of examination, only professional matter or school official examination will be accepted. Request can be made up to **2 WEEKS** prior the examination by writing to courses@alliancefrancaise.org.sg and **MUST** be supported by an official letter from the company/ school.

No postponement will be accepted for any other reasons including clashes of dates with school trips, personal and holiday arrangements or medical leave.

The postponement can only be made **ONCE** and to the *next available session only*. Please note should there be a difference in the examination fees, top up of examination fees is needed.

On the day of the examination, please bring your **IDENTITY CARD** and the **CONVOCAATION SLIP**. Please write your Registration number which is indicated on the Candidate list on the door of the examination room.

Oral examination schedule may change. Please check the general schedule that will be displayed on the door of the examination room after the group test on the exam day.

By registering for any DELF-DALF exam, the candidate acknowledges reading and accepting the above Terms and Conditions.

Name : _____

Date : _____

Signature : _____

Please read the Terms & Conditions and acknowledge