

Candidate Test Day Photo Authorisation Form

Centre Name: Expert English Training Centre Centre Number: ES089 Telephone number: 684 620 455

Use this form if you are 17, or under 17, years of age. You must complete all sections of this form.

*If you want to use your result for UK visa and immigration purposes (other than ILR and Citizenship) please contact your centre for a different registration form.

Exam details:

Which exam are you registered for?	Paper-based	Computer-based
Cambridge English: First(FCE)		
Cambridge English: Advanced(CAE)		
Cambridge English: Proficiency (CPE)		
Cambridge English: BEC (Preliminary, Vantage, Higher)		

On which date will you take the exam?

Candidate's details:

First name(s):

Family Name:

These names must be the same as the names on your passport/National Identity Card and must appear in the same order

Date of birth:

(day/month/year)

ID Number:

Declaration:

I am the parent/legal guardian of the candidate named on this form and I give consent to this person taking the Cambridge English exam selected above.

I understand that all individuals who want to take a Cambridge English exam are required to agree to all of the Terms and Conditions (a copy of which has been provided by the centre).

I agree to the candidate being admitted for the selected Cambridge English exam at the centre listed on this form and for the date listed here. The candidate will bring a valid photo ID with them on the test day, and I consent to them having their photo taken by the centre on the day of the Speaking test and/or the written papers. I agree for this photo to be held on the secure Cambridge English Language Assessment Results Verification site and viewed as set out below if I give my agreement on behalf of the candidate. The photo shall only be available to organisations/individuals that I agree to Cambridge English Language Assessment giving the candidate's details to or authorise to view the candidate's result.

By signing this form I declare that I am aware of and agree to comply with the Terms and Conditions for this exam.

Signature of

Parent/ Guardian:

Date:

Signature of

candidate:

Date: