

15. Reason for taking the test: education purposes employment career advancement
 personal reasons immigration purposes

16. Formal schooling: Primary school Secondary school 'A' level standard
 Degree Masters PhD

17. Number of languages spoken _____

18. What languages? _____ basic knowledge working knowledge excellent knowledge
_____ basic knowledge working knowledge excellent knowledge
_____ basic knowledge working knowledge excellent knowledge
_____ basic knowledge working knowledge excellent knowledge

19. How many years have you been studying English? _____

20. How many years ago did you finish your last English course? _____

21. Where did you last study English? Primary school
 Secondary school
 University
 English Language school
 other _____

22. ESaT Centre location _____

23. Test session date _____

24. Candidates with permanent disabilities may be granted 'Special Arrangements' during ESaT exams. Do you have specific learning, visual or hearing difficulties or other medical conditions that might affect your ability to do the exam or require modified exam material, extra time, use of specific technology, separate invigilation etc.?
 Yes No

If you answered yes to the above, please also complete the **Special Arrangements Form** and send together with the Candidate Application Form and any supporting medical evidence.

Requests for Special Arrangements will only be considered if an original supporting medical report is attached to the Special Arrangements Form. The report must have been prepared not more than two years before the exam date. Requests for Special Arrangements must be submitted not later than two months before the exam date.

ESaT reserves the right to refuse the granting of Special Arrangements.

Candidate Declaration

1. I declare that the information I have supplied is, to the best of my knowledge, true, accurate and complete in all respects. I will promptly inform ESaT of any changes of address or other personal details.
2. I understand that unless all parts of this form are completed, my application may not be processed.
3. I certify that I am the person who will be taking the test and whose name and address appear on this form.
4. I understand that I will not be formally enrolled for the test until full payment has been made. I shall receive written confirmation of my enrollment and other exam related material shortly after payment has been confirmed from the ESaT Centre.
5. I understand that once the examination has been booked, the full test fee will be charged and no refunds can be considered under any circumstances unless an appropriate medical certificate is provided at least 7 days before the Test session.
6. I agree to comply with any possible local terms and conditions.
7. I understand that ESaT collects the personal data on this Application Form for research and test development purposes. I consent to the ESaT Centre holding and processing the categories of personal data about me in the attached form for the specified purposes.
I also consent for this data, photographs and test results to be disclosed by ESaT to those organisations or governments to which I apply, to allow these organisations and governments to verify my test results or use this data while carrying out suspected malpractice enquiries. In the case that ESaT discovers that I have submitted/presented a false or modified Certificate or Analysis of Results, I consent to ESaT informing the organisations or governments as well as providing them with all relevant correct information.
8. I understand that unless I present the correct identification, I will not be admitted into the test room and allowed to sit the exam. I understand that proof of identification will be requested every time I am temporarily allowed to leave the test room and wish to be readmitted (eg. after going to the bathroom).
I understand that for the entire duration of the test sessions, the invigilators/examiners must at all times be able to verify the identity of a candidate and that I will not wear sunglasses or cover my face in any way.
9. I understand that in the case of a person being caught taking the test in place of the candidate registered for the exam, legal action can be taken against both the registered candidate and the person caught taking the exam. All relevant authorities (universities, immigration department etc.) may be informed of the situation.
10. ESaT will take all necessary steps to keep candidates' personal details anonymous.
11. I consent to having my voice recorded by the ESaT Centre on the day of the Speaking Test. I also consent to having an observer attend the Speaking Test to monitor the testing process.
12. I understand that requests for 'Special Arrangements' will only be taken into consideration if the request is accompanied by adequate medical reports. I understand that the request is accepted only once written approval is received from ESaT.
13. I understand that all work produced by candidates while sitting an ESaT exam, remains property of ESaT. I understand that no claims can be made of ownership of the material or requests for ESaT to release the material produced during the exam.
ESaT will only release material to the relevant authorities in the case of a suspected malpractice investigation.
14. I understand that no letter, email or other document will be issued by the Test Centre confirming attendance of an ESaT examination.
15. I understand that ESaT examiners will not discuss results with me. I will be informed of my performance in writing within four weeks from the Examination session. The certificate will be issued after approximately six weeks.
16. To guarantee the accuracy and integrity of ESaT test results, ESaT may decide to withhold issuing results 4 weeks after the test session if there is suspicion of malpractice during the test session. The results may be withheld either temporarily or permanently, depending on the outcome of the investigation.
In the case of an investigation being launched after test results and certificates being issued, ESaT reserves the right to cancel these results and certificates if the investigation indicates that the results cannot be considered reliable.
17. I understand that if I am suspected or proof established of my having engaged in any form of malpractice, ESaT may decide to permanently withhold issuing my result. I further understand that in this case, no claims can be made for the refund of any test fees. ESaT may also decide to prohibit me from taking ESaT tests in the future.
18. I hereby acknowledge to have read the ESaT Notice to Candidates and agree to abide by all the rules and conditions contained therein.

Candidate Name and Surname _____

Candidate Signature _____ Date ____/____/____