

## **Registration Form**

FRANCE EDUCATION INTERNATIONAL

TCF

Fill in your	details to complete your registration:
Last name	First name
DOB	Place of birth (city/ state/ country)
Nationality	Mother language
Address	
City	Zip code
Phone	Email
School(s) yo	ou have been learning French at ?
I would lik	e to take :
TCF Tout P	Public TCF Canada TCF IRN TCF Québec
	ec: Attached a photo with this form IRN: A photo will be taken on the day of the exam  Exam date:
Reason for	taking the TCF:
Naturalizatio	n Level validation Immigration to Canada Professional
Residency	Studies Immigration to Quebec Other
Participation doctor's note and need to tr	e who submits a transfer request after this Registration Deadline is subject to repay the full exam fee can only be transferred to the next session (without penalty) in the case of sickness, provided that a is mailed (not via email) within three days of the original Exam Date. If you have registered for an example to another session, please email <a href="mailto:programs@alliancehouston.org">programs@alliancehouston.org</a> . Française of Houston reserves the right to cancel a session due to weather inclement. All registrations will he next session.
Date and p	olace : Signature :
	ESPACE RÉSERVÉ À L'ADMINISTRATION :
□ Photo d'id	re dûment rempli entité  Réception paiement  Inscription logiciel DELF/DALF