

## Registration form / Selection Tests

### Test

I would like to take the following test at the Goethe-Institut Glasgow

Subject

University applied to

Date

Time *(agreed with Goethe-Institut)*

### Kontaktdaten

Mr       Ms       Mrs       Miss       Title *(if applicable)*

First Name

Surname

Address

Town/City

Postcode

Telephone

Email:

Date of Birth\*

Place of Birth\*

Country of Birth\*

*\*required field*

### Fee applicable

£80

£100 (up to 4 hrs)

special fee applies *(as of arrangement between the University and the Goethe-Institut e.V)* £

### Payment of fee

Fee will be paid by the university I applied too

The fee is paid by myself

Please charge my debit/credit card *(VISA/MASTER)*

Card number:

Valid from:

to:

CVV2 Code *(three digit number on the back of the card)*

**This form can be completed electronically. Please send the form to :**

**E: [german@glasgow.goethe.org](mailto:german@glasgow.goethe.org)**