



PROFICIENCY TESTING IN LANGUAGES 2019-2020

REGISTRATION FORM

PERSONAL INFORMATION

Name: Last _____ First _____ Middle _____

Date of Birth: Mo. _____ Day _____ Year _____ Email _____

MUST INCLUDE THE FOLLOWING

Address _____

City/Municipality _____ State/Province _____

Country _____ Postal Code _____

Home Phone _____ Work Phone _____

Language to Be Tested _____ Points _____

TO BE FILLED IN BY THE NYU SCHOOL OF PROFESSIONAL STUDIES

Course Number _____ Semester _____

PAYMENT INFORMATION

I have enclosed a check or money order payable to New York University. Credit cards cannot be used to register by mail. In order to pay with a credit card, you can request a payment link to a secure site by sending an email to sps.fipec@nyu.edu, and specifying the language and type of exam (4-point, 12-point, or 16-point).

Checks should be mailed to: NYUSPS Center for Applied Liberal Arts, Attention: Language Proficiency Exam, 7 East 12th Street, 6th floor New York, NY 10003

INSTITUTIONAL INFORMATION

Results of the examination should be sent to (a complete address is essential):

Name _____ Title _____

Email _____ Phone _____

Institution _____

Address _____

City/Municipality _____ State/Province _____

Country _____ Post Code _____

If this is an offsite exam, please give the name and the institutional address of the person who has agreed to administer the exam:

Name _____ Title _____

Email _____ Phone _____

Institution _____

Address _____

City/Municipality _____ State/Province _____

Country _____ Post Code _____

If more than one institution is to receive a report, please copy this form and fill out one copy for each recipient, and include a \$15 payment for each additional institution.

Note: Official letters will not be mailed to institutions for tests that are more than five years old.