

Examination Entry Card

CANDIDATES MUST USE A SEPARATE ENTRY CARD FOR EACH EXAMINATION ENTERED

Please read through the notes overleaf before completing all relevant parts in BLOCK CAPITALS using black ink or biro.

If you are a member of the Institute (AIL, MIL, FIL) give your Membership number to qualify for a 10% discount:

Please tick to indicate which exam you are entering and complete the corresponding box on the next page.

Tick this box if you require Reasonable Adjustments and please specify these on the back page, continuing on a separate sheet if necessary.

Boxes A & F overleaf must be completed by all candidates.

	EXAM	✓	BOX
80	CBS		D
75	DPSI		E
70	DIPTRANS		B
95	IDBC		C

SURNAME				PAYMENT OF EXAMINATION FEE												
TITLE (Mr/Mrs/Ms/Other)				FOR OFFICE USE - CAND. NO.												
OTHER NAMES (in full)				Before completing this section, please refer to the current fees list and to Note 4 overleaf.												
ADDRESS				I enclose my examination fee of £												
DAYTIME PHONE NUMBER (+STD / area code)				Less 10% membership discount (if applicable)* £												
MOBILE PHONE NUMBER				Plus my Open Centre Fee (if applicable) £												
EMAIL				TOTAL AMOUNT ENCLOSED £												
SEX (please circle)	Male			Payment by Cheque												
NATIONALITY				I enclose a cheque for the full amount in accordance with Note 4 overleaf, payable to "IoL Educational Trust" (please tick) <input type="checkbox"/>												
DATE OF BIRTH (d/m/y)				Payment by Debit / Credit Card												
NATIVE LANGUAGE				I wish to pay by (please circle one)												
ETHNIC GROUP (please circle one)	White UK Heritage	White European	White Other (known)	White Type not known												
This information is requested for equal opportunities monitoring only.	Black Caribbean Heritage	Black African Heritage	Black Other	Other	In accordance with Note 4 overleaf Debit/Credit Card Number:											
	Indian	Pakistani	Bangladeshi	Chinese	<table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>											
I prefer not to say (please tick) <input type="checkbox"/>				<table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>												
				Issue Date: (Debit Card Only) <table border="1" style="width: 40px; height: 20px; display: inline-table;"><tr><td></td><td></td></tr></table> / <table border="1" style="width: 40px; height: 20px; display: inline-table;"><tr><td></td><td></td></tr></table>												
				Expiry Date: <table border="1" style="width: 40px; height: 20px; display: inline-table;"><tr><td></td><td></td></tr></table> / <table border="1" style="width: 40px; height: 20px; display: inline-table;"><tr><td></td><td></td></tr></table>												
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				Security Code: (last 3 digits on reverse) <table border="1" style="width: 60px; height: 20px; display: inline-table;"><tr><td></td><td></td><td></td></tr></table>												
				Name of Candidate:												
				Name of Card Holder (as it appears on the card), if different to Candidate:												

Notes

- 1) Candidates must read the loLET booklet "Candidate Regulations" before completing this card.
- 2) Candidates must ensure that they are fully aware of the level and format of the examination for which they are entering by referring to handbooks and past papers.
- 3) Candidates must complete Box A, Box F and one of the boxes B-E depending on the examination they wish to sit.
- 4) Completed registration cards sent without full relevant payment will not be processed. Payment can be made either by cheque (drawn on a British bank account and made payable to "loL Educational Trust" or by credit card (minimum payment of £25 applies). For list of accepted cards see previous page. Cash payments are not accepted. For other forms of payment other than cheque or credit card, please contact 0207 940 3163. Please note that in all cases the loLET Open Centre fees are not refundable.
- 5) Where a minimum number of candidates is required for a particular examination, and where that number has not been reached by the close of registration, the loLET reserves the right to withdraw that examination at which time the candidate will receive a full refund of the examination fee.
- 6) If candidates are entering for more than one language or level at the same session it is their responsibility to check that there is no timetable clash.
- 7) The loLET will retain and use examination material for internal training purposes.
- 8) Candidates entering for a re-sit of specific DPSI or CBS tasks must enclose a copy of their Letter(s) of Credit.
- 9) Completed entry cards must be returned to the Central Registration Department at the loLET before closure of the relevant registration period (see "Candidate Regulations"). Please enclose Centre Letter as required.

BOX A To be completed by all candidates.	Year of examination	
	Examination Centre (Where you are sitting the exam)	

BOX B	DIPLOMA IN TRANSLATION (DipTrans)		
	Source Language (i.e. language in which text to be translated is written)		
	Target Language (i.e. language into which the text is to be translated)		
Units being taken – Please circle as appropriate			
Unit 01	Unit 02	Unit 03	
Papers previously passed (if applicable)			
Year (s)	Centre	Candidate No.	Source Language
Unit (s) passed (including Semi-Specialised Options):			Target Language

BOX C	INTERNATIONAL DIPLOMA IN BILINGUAL COMMUNICATION (IDBC)			
Modules being taken – please circle as appropriate				
Module 1	Module 2	Module 3	Module 4	Module 5
Modules previously passed (if applicable)				
Year (s)	Centre	Candidate No.	Language	
Module (s) passed:				

BOX D	CERTIFICATE IN BILINGUAL SKILLS (CBS)		
Language of examination, other than English			
If re-sitting, state which parts			
Unit(s) previously passed (if applicable)			
Year (s)	Centre	Candidate No.	Language
Unit (s) passed:			

BOX E	DIPLOMA IN PUBLIC SERVICE INTERPRETING (DPSI)		
Language of examination, other than English			
Option being taken – please circle as appropriate			
Health	English Law	Scottish Law	Local Government
If re-sitting, state which parts			
Part(s) previously passed (if applicable)			
Year (s)	Centre	Candidate No.	Language
Unit (s)/Task (s) passed:			

2008 CBS/DPSI Languages			
<input type="checkbox"/> Albanian	<input type="checkbox"/> Farsi	<input type="checkbox"/> Mandarin (Traditional script)	<input type="checkbox"/> Tamil
<input type="checkbox"/> Amharic	<input type="checkbox"/> French	<input type="checkbox"/> Mandarin (Simplified script)	<input type="checkbox"/> Tigrinya
<input type="checkbox"/> Armenian Eastern	<input type="checkbox"/> German	<input type="checkbox"/> Panjabi (Indian)	<input type="checkbox"/> Thai
<input type="checkbox"/> Armenian Western	<input type="checkbox"/> Greek	<input type="checkbox"/> Panjabi (Pakistani)	<input type="checkbox"/> Turkish
<input type="checkbox"/> Arabic (MSA)	<input type="checkbox"/> Gujarati	<input type="checkbox"/> Pashto	<input type="checkbox"/> Ukrainian
<input type="checkbox"/> Arabic (North African Maghrebi)	<input type="checkbox"/> Hindi	<input type="checkbox"/> Polish	<input type="checkbox"/> Urdu
<input type="checkbox"/> Bengali	<input type="checkbox"/> Hungarian	<input type="checkbox"/> Portuguese (European)	<input type="checkbox"/> Urdu (Mirpuri)
<input type="checkbox"/> Bengali (Sylheti)	<input type="checkbox"/> Italian	<input type="checkbox"/> Portuguese (Brazilian)	<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Bulgarian	<input type="checkbox"/> Jamaican*	<input type="checkbox"/> Romanian	
<input type="checkbox"/> Cantonese (Traditional script)	<input type="checkbox"/> Japanese	<input type="checkbox"/> Russian	
<input type="checkbox"/> Cantonese (Simplified script)	<input type="checkbox"/> Kurdish (Sorani)	<input type="checkbox"/> Serbian (in Cyrillic script)	
<input type="checkbox"/> Croatian	<input type="checkbox"/> Kurdish (Bahdini)	<input type="checkbox"/> Slovak	
<input type="checkbox"/> Czech	<input type="checkbox"/> Latvian	<input type="checkbox"/> Slovene	
<input type="checkbox"/> Dari	<input type="checkbox"/> Lingala	<input type="checkbox"/> Somali	
<input type="checkbox"/> Dutch	<input type="checkbox"/> Lithuanian	<input type="checkbox"/> Spanish	
<input type="checkbox"/> Estonian	<input type="checkbox"/> Macedonian	<input type="checkbox"/> Swahili	

Notes

- 10) The IoL Educational Trust organises many examinations every year. There are occasionally unforeseen problems. In these circumstances, the IoLET always does its best to rectify the problem, but may have to make alternative arrangements. The IoLET will not be responsible for any consequential losses arising from such problems.

* Subject to external funding.

BOX F -To be completed by all candidates	
By completing an IoL Educational Trust examination Entry Card and paying the appropriate examination fee, the candidate is agreeing to abide by the regulations governing such candidates which are contained in the IoL "Candidate Regulations".	
Tick this box if you do <u>not</u> wish the information provided to be shared within the Chartered Institute of Linguists' group.	<input type="checkbox"/>
I have read and agree to abide by the "Candidate Regulations"	
Candidate Signature:	
Date:	

You can download your copy of the "Candidate Regulations", "Examination Handbooks", "Examinations Newsletter" and "Past Paper Order Form" from the [IoL website \(www.iol.org.uk\)](http://www.iol.org.uk).

Please print clearly your name and address in the box below so that we can confirm receipt of your entry card.

NAME ADDRESS
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Reasonable Adjustments

Please give detailed information of any Reasonable Adjustments that you may require.
All candidates are required to submit supporting evidence (eg. medical or professional statement).
A written statement is required from the examination centre, agreeing to the provision of Reasonable Adjustments.
This entry will only be accepted and processed if the above information is enclosed.

The IoL Educational Trust thanks you for your completed Examination Entry Card.
Examination details will be released to candidates by individual Examination Centres and not the IoL Educational Trust.

Address:

Central Registration Department, Saxon House, 48 Southwark Street, London, SE1 1UN

Contact:

Central Registration Department, Tel: 0207 940 3163, Fax: 0207 940 3124, Email: exams.crd@iol.org.uk, Web: <http://www.iol.org.uk>