

DELF\DALF REGISTRATION FORM

To be filled in capital letters and sent to allianceeldoret@alliancefrnairobi.org

Personal information **of the candidate.**

STUDENT MEMBERSHIP NO. (*if you are already a student at Alliance Française d'Eldoret*)

MR, MISS, MRS.....

FAMILY NAME

OTHER NAMES

DATE OF BIRTH (DD/MM/YYYY)

TOWN OR CITY OF BIRTH

NATIONALITY

TELEPHONE NO

EMAIL ADDRESS

NATIONAL ID NO. / PASSPORT NO.

DELF / DALF tout public: DELF A1 DELF A2 DELF B1 DELF B2 DALF C1 DALF C2

DELF JUNIOR: DELF A1 DELF A2 DELF B1 DELF B2

DELF PRIM: DELF A1.1 DELF A1 DELF A2

Pay via m-pesa : paybill number : **898660** – acct: **ELDORET**

Date paid

Amount paid

M-pesa reference number.....

RULES AND REGULATIONS

1. All candidates must confirm registration by paying before the registration deadline.
2. No refunds will be made after payment has been done.
3. Exams can only be postponed if the request is made at least **3 weeks before the set examinations date. Postponement can only be within the same academic year.**
4. All candidates must present a valid ID on the day of examinations.
5. Candidates arriving late on the day of the examinations **will not be admitted.**

I hereby certify that I have read and understood the rules and regulations and that I agree to abide by them.