

Instructions for Completing International Test Scheduling Form

Do NOT mail or fax more than once.

IMPORTANT: If the form is not properly filled out (contains incomplete information, unclear letters, or non-English characters), it MAY cause a delay in your registration and appointment scheduling. Please read the instructions carefully.

Completing the Form

- Use black ink.
- The name given on the form must match the name on the identification document that will be presented at the test center.

Payment Information

- You can fax or mail the form if you pay with a credit card or supply a voucher number.
- You must mail the form if submitting a check or other physical payment. For a list of acceptable currencies, see page 4. If your payment is not included with your form, your test appointment will not be held.

Test Date and Center Information

Note: TOEFL is not given every day at all test centers. Contact your RRC for the latest information (see page 17). If you are testing at a supplemental center, see page 20.

- Indicate your first five date choices by month (MM) and day (DD); for example, May 21 would be listed as 05/21.
- Indicate the test center number where you want to test, and write out the name of the city where the test center is located. You may also indicate a second-choice center.

Submitting This Form

- **If you mail the form**, the RRC must receive it at least three weeks prior to your first-choice test date. Insert the form and the proper fee payment in the appropriate envelope provided. Refer to the list of RRCs on page 17 of this *Bulletin* for the mailing address, and use the correct mailing label provided.

- **If you fax the form**, the RRC must receive the form at least seven days prior to your first-choice test date. Be sure to include your credit card information. Fax it to the appropriate RRC (see page 17 in this *Bulletin* for fax numbers).

Scheduling Process

- When scheduling your appointment, Prometric will try to schedule your first-choice date, then second, third, fourth, or fifth choice in chronological order at your first-choice test center. If you decide to select a second-choice test center, Prometric will then try to schedule your first choice, then second, third, fourth, or fifth choice at your second-choice center. If none of the dates are available, Prometric will try to schedule you for a day closest to your choices.
- If you have a problem with the appointment scheduled for you, contact your RRC.

Retaking the Test

You may **not** take the computer-based TOEFL test more than once per calendar month.

Confirmation Letter

If you do not receive a confirmation of your appointment, you must call the RRC at least three business days prior to your first-choice appointment. If you miss your appointment and did not call the RRC, your test fee will not be refunded.

Country Codes

001 Afghanistan
003 Albania
005 Algeria
007 American Samoa
008 Andorra
010 Angola
011 Anguilla
012 Antigua and Barbuda
015 Argentina
016 Armenia
017 Aruba
020 Australia
025 Austria
029 Azerbaijan
030 Azores
035 Bahamas
040 Bahrain
045 Bangladesh
050 Barbados
094 Belarus
055 Belgium
056 Belize
058 Benin
060 Bermuda
063 Bhutan
065 Bolivia
069 Bosnia and Herzegovina
070 Botswana
075 Brazil
077 British Virgin Islands
081 Brunei Darussalam
085 Bulgaria
593 Burkina Faso
092 Burundi
307 Cambodia
095 Cameroon
100 Canada
106 Cape Verde
110 Cayman Islands
113 Central African Republic
114 Chad
115 Chile
457 China, People's Republic of
120 Colombia
122 Comoros

630 Congo-DRC (Formerly Zaire)
125 Congo Republic
126 Cook Islands
130 Costa Rica
290 Côte d'Ivoire (Ivory Coast)
133 Croatia
135 Cuba
140 Cyprus
142 Czech Republic
150 Denmark
153 Djibouti
154 Dominica, Commonwealth of
155 Dominican Republic
165 Ecuador
170 Egypt
175 El Salvador
180 England
183 Equatorial Guinea
182 Eritrea
184 Estonia
185 Ethiopia
187 Faroe Island
190 Fiji
195 Finland
200 France
203 French Guiana
202 French Polynesia
204 Gabon
205 Gambia, The
206 Gaza Strip
208 Georgia
210 Germany
215 Ghana
220 Greece
225 Greenland
227 Grenada
228 Guadeloupe
229 Guam
230 Guatemala
233 Guinea
234 Guinea-Bissau
235 Guyana
240 Haiti
245 Honduras
250 Hong Kong

251 Hungary
255 Iceland
260 India
265 Indonesia
270 Iran
273 Iraq
275 Ireland
277 Isle of Man
280 Israel
285 Italy
295 Jamaica
300 Japan
305 Jordan
308 Kazakhstan
310 Kenya
312 Kiribati
314 Korea (DPR)
315 Korea (ROK)
320 Kuwait
323 Kyrgyzstan
325 Laos
328 Latvia
330 Lebanon
333 Lesotho
335 Liberia
340 Libya
343 Liechtenstein
344 Lithuania
345 Luxembourg
347 Macau
348 Macedonia, former Yugoslav Republic of
350 Madagascar
353 Madeira Islands
355 Malawi
360 Malaysia
361 Maldives
363 Mali
365 Malta
367 Northern Mariana Islands
368 Marshall Islands
366 Martinique
369 Mauritania
370 Mauritius
375 Mexico
107 Micronesia, Federated States of
376 Moldova

378 Monaco
379 Mongolia
381 Montserrat
380 Morocco
385 Mozambique
090 Myanmar (Burma)
388 Namibia
386 Nauru
387 Nepal
390 Netherlands
395 Netherlands Antilles
396 New Caledonia
405 New Zealand
420 Nicaragua
425 Niger
430 Nigeria
433 Niue Island
434 Northern Ireland
435 Norway
443 Oman
445 Pakistan
447 Palau
450 Panama
400 Papua New Guinea
455 Paraguay
460 Peru
465 Philippines
470 Poland
475 Portugal
474 Puerto Rico
477 Qatar
482 Reunion
483 Romania
484 Russia
487 Rwanda
486 St. Kitts and Nevis
521 St. Lucia
522 St. Vincent and the Grenadines
488 San Marino
489 Sao Tome and Principe
490 Saudi Arabia
495 Scotland
497 Senegal
498 Seychelles
500 Sierra Leone
505 Singapore
503 Slovakia

504 Slovenia
506 Solomon Islands
507 Somalia
510 South Africa
515 Spain
520 Sri Lanka
525 Sudan
527 Suriname
530 Swaziland
535 Sweden
540 Switzerland
545 Syria
550 Tahiti
555 Taiwan
556 Tajikistan
560 Tanzania
565 Thailand
567 Togo
570 Tonga
575 Trinidad and Tobago
580 Tunisia
584 Turkmenistan
585 Turkey
586 Turks and Caicos Islands
587 Tuvalu
590 Uganda
589 Ukraine
591 United Arab Emirates
588 United Kingdom*
592 United States of America
607 U.S. Virgin Islands
595 Uruguay
594 Uzbekistan
596 Vanuatu
597 Vatican City
600 Venezuela
605 Vietnam
610 Wales
611 West Bank
620 Samoa
623 Yemen
625 Yugoslavia
635 Zambia
480 Zimbabwe

Use 999 for any country/region not listed.

*See England, Scotland, Wales, and Northern Ireland.

Do not use this form if you plan to test in the United States, Canada, American Samoa, Guam, U.S. Virgin Islands, or Puerto Rico.

See the back of this form for instructions. Mail or fax your completed form to the Regional Registration Center (RRC) for the country in which you plan to test (see page 17). **Do not send this form to ETS.**

Please print all information clearly in English characters. **DO NOT** include accent marks or any other special characters. Use black ink to complete the form.

The name given when registering must match the name on the identification document that will be presented at the test center. If you are not sure how to enter your name on this form, include a photocopy of your identification with the completed form when sending it to the RRC. You still need to take identification to the test center.

Number on Identification Document (e.g., passport, national certificate of citizenship, or national ID card):

First/Given Name
(as on photo ID):

Middle Name:

Last/Family Name
(as on photo ID):

Day Phone:

(include country and city codes)

Evening Phone:

(include country and city codes)

Birth Date (MM-DD-YYYY):

Fax Number:

Mailing Address:

City:

State/Province:

Postal Code:

Country Code for this

Mailing Address:

(see codes on back)

Email
Address:

Check here if appointment confirmation should be sent to this email address.

NOTE: Bank checks, personal checks, Eurochecks, and money orders must be payable to **ETS-TOEFL**. See page 4 of the *Bulletin* for acceptable currencies.

PAYMENT TYPE (fill in one circle):

- Bank Check/Personal Check (enclosed) – UNESCO Coupons (enclosed)
 – Eurocheck – Europe only (enclosed) – Credit Card (Provide account information below.)
 – Money Order – (enclosed) – Voucher Number:

Type of Currency: _____ Amount Enclosed: _____

Credit Card (fill in one circle): VISA[®] MasterCard[®] American Express[®]

Account Number:

Expiration Date: (MM-YY):

Card Holder
Name:

Specify five dates in order of preference and test center location(s).

Month of the Year (MM): 01 - 12

1st choice

2nd choice

3rd choice

4th choice

5th choice

Day of the Month (DD): 01 - 31

for example May 21 =

MM - DD

MM - DD

MM - DD

MM - DD

MM - DD

First choice

Test Center Number

write city name of test center

Second choice

(Optional)

Test Center Number

write city name of test center

I hereby agree to the general conditions set forth in the 2002-03 *TOEFL Information Bulletin*, and I agree to the policies and procedures related to computerized testing, specifically those concerning test administration, payment of fees, and reporting of scores. I certify that I am the person who will take the test at the center and whose name and address appear on this form.

Signature: _____

Date: _____

