IoLET DPSI Exam Entry Form - November 2018

Before completing this entry form please ensure you have read our Candidate Regulations and have registered for IoLET Affiliate membership or higher (www.ciol.org.uk/ia).

Complete this form in BLOCK CAPITALS.

If you are sitting at the IoLET Open Centre please email your form to info.dpsi@ciol.org.uk.

To sit at a different Exam Centre please submit your Entry Form to your Centre directly.

Please note all required fields must be complete in order for the entry form to be accepted.

CIOL membership number	Candidate number
A <u>current</u> CIOL membership (at IoLET Affiliate grade or	
higher) is required to sit an IoLET exam. Please check yours via www.ciol.org.uk/member-check	To be completed if you have previously sat an IoLET exam.

SECTION 1 – PERSONAL DETAILS

TITLE (circle as appropriate)	Mr	Mrs	Miss	Ms	Dr	Other
FIRST NAME(S)						
LAST NAME(S)						
DATE OF BIRTH	/	/	(dd/mm	/yyyy)		
CONTACT NUMBER(S) inc. country code						
EMAIL ADDRESS						
ADDRESS						
NATIONALITY						
GENDER (please circle)	Male Female					
ETHNIC GROUP (please circle one)	White UK Herita		White European	White Other (kno		White e not known
This information is requested for equal opportunities monitoring	Black Carib Heritag		Black rican Heritage	Black Other		Chinese
only.	Indian		Pakistani	Banglade	eshi	Other
		·		I prefer not	t to say (please	tick)

SECTION 2A - EXAM DETAILS

		DPSI la	nguag	e selectic	n – P	lease	e tick one only:		
Albanian		☐ Fre	ench			Panja	abi (Indian)		Tamil
Amharic		German			Panjabi (Pakistani)			Thai	
Arabic (MSA	4)	Gre	eek			Pash ⁻	to		Tigrinya
Bengali		☐ Gu	jarati			Polis	h		Turkish
Bengali (Syl	heti)	☐ Hir	ndi			Portuguese (European)			Ukrainian
Bulgarian		☐ Hu	ngarian			Portuguese (Brazilian)			Urdu
Cantonese (Traditional	script)	☐ Ital	ian			Roma	anian		Urdu (Mirpuri)
Cantonese (Simplified s	script)	☐ Jap	oanese			Russi	an		Vietnamese
Croatian		☐ Ku	rdish (So	rani)		Serb	erbian (Cyrillic script)		
Czech		Lat	vian			Slova	Slovak		
☐ Dari		Lith	nuanian			Slovene			
Dutch		Ма	cedonia	า		Somali			
Estonian			Mandarin (Traditional script)			Spanish			
Farsi			ndarin mplified script)		Swah	ili			
	Pat	thway s	electic	n – Pleas	e <u>circ</u>	le or	ne pathway only:		
Health	E	English La	Law Scottish Law			Northern Irish Law		Local Government	
	Unit(s) sa	lection	_ Plea	se circle s	ıll the	unit	s you would like	to si	+·
Unit 01	Om(3) 30	Unit 02	- i ica			. um	s you would like	10 31	<u>c</u> .
(English Law only	r) (En	nglish Law			Law only)			Unit 05	
		SEC	TION :	2B – EXA	м се	NTRI	E DETAILS		
Exam Centre – w the exam *	here you are	sitting							
(Please write the <u>f</u> centre)	ull name of t	the							

^{*}Candidates are advised that, if not possible to locate a complete team of assessors for a particular language/pathway to conduct the exam in the exam centre/area where they have registered, candidates will be automatically transferred to the IoLET Open Centre or the most suitable exam centre available.

SECTION 3A - PAYMENT INFORMATION

Exam Fees

Unit 01	£227.00
Unit 02	£186.00
Unit 03	£186.00
Unit 04	£186.00
Unit 05	£186.00
All five units*	£680.00

^{*}Fees are capped at £680.00 – if the total cost of the units you are sitting exceeds this amount the <u>maximum</u> payment is still £680.00.

Centre Enrolment Fees (IoLET Open Centre* candidates only)

Unit 01	£53.00
Unit 02 and/or 03	£53.00
Unit 04 and/ or 5	£53.00
Full IoLET Open Centre Enrolment Fee (all five units)	£159.00

^{*}loLET runs an exam centre in London, which is called the loLET Open Centre.

If you are sitting your exam at the loLET Open Centre, please pay the Centre Enrolment Fees above.

SECTION 3B – PAYMENT METHOD

I wish to make payment via: (Please tick as	Bank Transfer (BACS) Account name: IoL Educational Trust Bank name: Royal Bank of Scotland Sort code: 16-00-15 Account no: 23122157 Swift Code (BIC): RBOSGB2L IBAN no: GB58RBOS 16001523122157	Payment reference:
appropriate)	Credit/debit card (excluding American Express)	Select this option and a member of the Client Services Team will contact you by phone to take payment.
	Cheque	Made payable to "IoL Educational Trust". Please send via Special / Recorded delivery to: IoLET, Dunstan House, 14a St Cross Street, London, EC1N 8XA, United Kingdom

SECTION 4 – REASONABLE ADJUSTMENTS

Do you require Reasonable Adjustments	Yes	If yes, provide details of your request below e.g. Extra Time.
under the Equality Act 2010? (please tick as applicable)	□ No*	

*If you do not require Reasonable Adjustment please go to Section 5

In order to request Reasonable Adjustments you will need to provide <u>medical evidence</u> issued within the last six months. This entry will only be accepted and processed if this section is completed correctly.

Please note Reasonable Adjustments must be requested for <u>each exam</u> - Reasonable Adjustments <u>cannot</u> be carried forward from previous years.

SECTION 5 - DECLARATIONS

- 1) Candidates must ensure that they are fully aware of the level and format of the exam for which they are entering by referring to the specific Exam Specification and past papers.
- 2) Completed entry forms sent without full relevant payment will not be processed. Payment can be made either by BACS, card or cheque (see section 3B for payment information).
- 3) Where a minimum number of candidates is required for a particular exam, and where that number has not been reached by the close of registration, the loLET reserves the right to withdraw that exam at which time the candidate will receive a full refund of the Exam Fee.

SECTION 6 – SIGNATURE

To be completed by all candidates
By signing and submitting this IoLET Exam Entry Form, including paying the appropriate fees, you agree to abide by the Candidate Regulations in addition to the Declarations listed above in Section 5.
Your data: The information you provide will be used by IoLET to create a candidate record and will be used to manage your entry and fulfil the benefits and services you expect as a candidate of IoLET exams. Your data will not be sold to any other third party without your consent.
I have read and agree to abide by the Candidate Regulations and the Declarations listed in Section 5.
Candidate signature:
Date:

Address: IoLET, Dunstan House, 14a St Cross Street, London, EC1N 8XA, United Kingdom

Contact: Client Services Team Tel: +44 (0)20 7940 3100 (select option 1)

Email: info.dpsi@ciol.org.uk Web: www.ciol.org.uk