

APPLICATION FORM
DELFTout Public A1 – B2
December 2020

Deadline: 1st November 2020

Exams are held at AFMM in Marsa and/or in our examination centres.

All communication prior and after the exam is done via email.

Late applications will be received against a fee of €10

APPLICANT'S DETAILS

Name & Surname _____

House name & number _____

Street name _____

Locality _____ Post code _____

Date of birth (dd/mm/yyyy) _____ Nationality _____

Gender: Female Male

Email (⚠ valid and checked regularly. **All official information and documents will be sent on this e-mail address**)

Mobile _____

Have you already sat for a DELF exam? Yes No

If Yes, please indicate your candidate number _____

APPLICATION

I am hereby applying for: (Tick where appropriate)

DELFTP A1 DELFTP A2 DELFTP B1 DELFTP B2

FOR ADMINISTRATION USE ONLY

Payment method : Bank transfer Cash Cheque
Attach proof of payment Cheque no. _____

Date of payment _____ Total _____

Course code _____ Administrator _____

Tariff

Exam	AF students	Outside candidates
DELFP - A1*	85.00 €	95.00 €
DELFP - A2*	95.00 €	105.00 €
DELFP - B1*	105.00 €	115.00 €
DELFP - B2	120.00 €	130.00 €

* Tarif préférentiel unique pour les étudiants de l'université à 70€.

Dates

DELFP Tout Public - September 2020		
Exam	Written exam	Oral exam
A1	01/12/2020	07/12/2020 - 11/12/2020
A2	02/12/2020	07/12/2020 - 11/12/2020
B1	03/12/2020	07/12/2020 - 11/12/2020
B2	03/12/2020	07/12/2020 - 11/12/2020

Terms & conditions:

- Registration fees for the DELFP / DALF exams are not refundable.
- The dates of the oral / written exams are final and cannot be changed.
- Candidates must be punctual otherwise the exam will not be valid.
- Candidates are to bring writing material with them on the day of the exam
- In the case of a candidate who is taken ill on the day of the exam, he/she should contact the Alliance Française to make arrangements to sit for the exam at the next scheduled session.

I hereby declare that I have read the terms and conditions of registration and accept them.

Tick box to confirm that you have read Terms & Conditions

I authorize the AFMM to use any photos taken during courses & activities on their social media

YES

NO

Name Surname in Block: _____

Date:

Signature:

Triq Il-Moll tal-Hatab, Timber Warf 7/8, Office 1&2, MARSA MRS1443

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