

Application: Test Of English for International Communication (TOEIC)

Name: _____ ID Type: _____

Family Name Middle First Name

Company or school: _____ ID Number: _____

Home Address: _____
Street Address City State Zip Code Country

Phone number: _____ Email Address: _____

Date of birth: (month) _____ (day) _____ (year) _____

Mark the type of test:

- TOEIC Listening & Reading (Paper based test)
- TOEIC Speaking & Writing (Computer based test)

Reason for taking test: _____

Payment Options:

- Cash (Please do not enclose cash. To be paid at least one week prior to test.)
- Check Amount Enclosed: _____
- Money Order Amount Enclosed: _____
- Credit Card (must be MasterCard or VISA)

Name on card: _____

Credit Card Number: _ _ _ _ - _ _ _ - _ _ _ - _ _ _ _

Expiration Date: _____ Security number (3 numbers on backside of card) _ _ _

Billing Address (if different from above):

_____ Street Address City State Zip Code Country

Amount: _____ Signature: _____

TEST CHECKLIST:

- Send in application (in person, fax, mail) and payment (phone, mail) one week before test date.
- On test day, arrive 15 minutes before the test time. Bring a current passport or other form of ID
- No dictionaries or cell phones will be allowed in the testing room.

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