



Candidate test day photo form – Non-Adult/Legal Guardian Candidate

Use this for candidates who are recognized as children in your country, or who are adults with a Legal Guardian.

Centre number: GR Centre address: 132	ddress: GR810 132 MAIZONOS STREET, PATRAS, 26222			
CANDIDATE DETAILS				
Full name:				
Date of birth (DD/MM/YY):				
Sex: Male Female				
EXAM DETAILS				
Which exam is the candidate taking?				
DO E	rst (FCE)	Paper -based	Computer -based	ı
C1 Advance	` ′			ı
C2 Proficien	• •			ı
Othe	er exam:			ı
On which date is the candidate taking the exam?				
DECLARATION				
I am the Parent/Legal Guardian of the candidate named on this form and I understand this person is taking the Cambridge Assessment English exam selected above. I understand and agree with the Summary Regulations, a copy of which has been provided to me by the Centre. I will make sure the candidate brings a valid photo ID with them on the test day. Otherwise, I am aware that the candidate will not be able to take the exam. If the candidate is taking the First, Advanced or Proficiency exam, I acknowledge that: • the candidate will have their photo taken by the Centre on the day of the Speaking test and/or the written papers; • the candidate will not be able to sit the exam unless this photo is taken; and • This photo will be sent to Cambridge Assessment and will be held on the secure Cambridge Assessment English Results Verification Service.				
Parent/Legal Guardian's name		Signature	Date (DD/MM/YY	YY)