



**German-Maltese Circle**  
**Messina Palace, 141, Triq San Kristofru, Valletta VLT 1465**  
**Email: gmc@germanmaltesecircle.org**  
**Tel. 21246967**

**Application Form for Goethe Institute**  
**Certificate Examinations**

**Candidate's details - Fill in block letters**

**ALL FIELDS MUST BE FILLED IN**

Surname: \_\_\_\_\_ First Name/s: \_\_\_\_\_

Address: \_\_\_\_\_  
 \_\_\_\_\_

Mobile/Home Tel. No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Email address: \_\_\_\_\_

**Examination applied for (mark with an "X" in appropriate box):**

<b>Start A1</b>	<b>€ 35</b>		<b>Zertifikat Deutsch für Jugendliche B1</b>	<b>€ 65</b>	
<b>Start A2</b>	<b>€ 35</b>		<b>Zertifikat Deutsch B1</b>	<b>€ 70</b>	
<b>Zertifikat B2</b>	<b>€ 75</b>		<b>Zertifikat C1</b>	<b>€ 75</b>	
<b>Late Application Fee</b>	<b>€ 20</b>		<b>Change of Exam Date Request Fee</b>	<b>€ 40</b>	

Applicants with a disability or with special needs and who require special assistance during the examination are to inform the examination centre. Any such claim must be supported by acceptable evidence of disability as directed by the examination centre – normally a doctor's or medical specialist's report. All claims will be evaluated in accordance with the relative Terms & Conditions issued by the Goethe Institute.

**Indicate (if applicable):** Visual Impairment/Hearing Impairment/Dyslexic/ Writing Difficulty / Speech Impairment

*I hereby give my consent for all personal data contained herein, and supplied by me after the date hereof to the German Maltese Circle (GMC), and its employees or representatives, to be recorded and processed as may be necessary by the said persons for the purpose of achieving the objectives of GMC. Furthermore, I acknowledge that I am aware of the right to request the GMC in writing to rectify or erase personal data subject to the GMC's obligations under Maltese law.*

*I confirm that the information submitted is correct and I also state that I will abide by the regulations governing the running of this examination.*

This application form, completely filled in and signed, is to reach the German-Maltese Circle **by not later than Wednesday, 31<sup>st</sup> March 2010.**

**Applications accompanied by the relative examination fee** can either be submitted at the German-Maltese Circle's office or else sent by post. Cheques should be made payable "German-Maltese Circle". Do not send cash by post! Examination fees are non-refundable.

Confirmation of the examination date as well as additional information concerning time, place and other relevant points will be sent to all applicants.

Signature of applicant: \_\_\_\_\_ ID No.: \_\_\_\_\_

Signature of parent or guardian if applicant is under 18 years: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Receipt No.: \_\_\_\_\_

Index Number: \_\_\_\_\_

Remarks: \_\_\_\_\_