

Confucius Institute in Edmonton (CIE) 爱德蒙顿孔子学院

YCT/HSK/BCT Registration Form 中小學生汉语考试/汉语水平考试/商务汉语考试申请表

For External Students

YCT Testing Date Registration Deadlines		Testing Address 考试地点 Confucius Institute in Edmonton 13750 Woodcroft Avenue Edmonton, Alberta Tele: 780 498 8753
HSK Testing Date Registration Deadlines	Sunday, October 23, 2011, 8:30 am –12:00 noon September 22, 2011	
BCT Testing Date Registration Deadlines		
Surname (Family Name) 姓:	Middle Name (If Applicable):	Given Name 名:
Chinese Name (If any): 中文名字		Gender 性别: 男 Male ___ 女 Female ___
Date of Birth(mm/dd/yyyy) 出生年月: ____/____/____	Your First Language 您的母语:	Name of Your School 你学校的名字:
Have you taken YCT/HSK before? Yes ___ No ___ Which level? YCT Level _____ Year _____ HSK Level _____ Year _____		Grade 几年级
Which level of the test are you going to write? 你参加哪一级的考试? YCT _____ HSK _____ BCT _____		Chinese Character Preference: Simplex 简体: _____ Complex 繁体: _____
Your mailing address 地址:		Home phone number 电话: ()
City 市	Province 省	Postal Code 邮编
Your e-mail address 电子邮址:		
Years of Chinese language study 中文学习多长时间 _____		Your ID Passport ___ Student ID ___ AHC ___ DL ___ Birth Certificate ___ Other _____
Chinese Bilingual Program: Grade _____		Your ID Number _____
Chinese Language & Culture (Chinese as a second language) : Grade _____		
<p>Please send the registration form, payment and 2 current photos to: Dr. Wei Li, Confucius Institute in Edmonton, 13750 Woodcroft Avenue, Edmonton, AB, T5M 3M4</p> <p>* Please make the cheque payable to <u>Confucius Institute in Edmonton</u> * Please refer the testing fee to <u>HSK Brochure</u></p>		
<p>Registration Checklist: Parental Permission Release Form (under 18) ___ Registration Form ___ Payment ___</p>		
<p>Attention: 1. All applicants should bring two 2B pencils and an eraser on the date of the test. 2. For further information, please contact: Dr. Wei Li at 780 498 8753 or 780 686 9579 or wei.li@epsb.ca</p>		

• The information you have submitted will be used for registration purpose by Confucius Institute in Edmonton & EPSB.

- I give my permission for my name and pictures to be published as part of recognition of students earning YCT or HSK credentials
- I give my permission for my child's name and pictures to be published as part of recognition of students earning YCT or HSK credentials

Student Name _____ School _____ Grade _____

Home Address _____ Phone _____

Signature (Parent/Guardian) _____ Date _____

