Dear candidate,

Firstly, we would like to express our gratitude for choosing the Faculty of Foreign Languages to assess your knowledge. This form serves to inform you about the rules and conditions of the exam.

|  |  |
| --- | --- |
|  |  |
| Name: | **Language:** |
|  |  |
| Surname: | **Level:** |
|  |  |
| Mobile: | **Data:** |
|  |  |
| E-mail: |  |

**I hereby declare that:**

* I have read the regulation and have understood the procedure for taking the foreign language proficiency exam,
* I shall not speak or disturb other candidates after the exam has started,
* If I am unable to attend the exam on the scheduled day despite completing registration and payment, I may request to reschedule the exam for the following month, provided that I notify at least 5 (five) days in advance (otherwise I shall not be reimbursed).
* I shall not use my mobile phone or other means of communication,
* I shall not leave the exam hall without the permission of the supervisor,
* I shall not make any attempts to copy in any form including the use of any notes or source of information,
* I understand that the only valid identification means are a valid Passport or ID,
* I shall be present the day of the exam at the specified time and at the exam hall for which I shall be notified by email,

**Data protection and Confidentiality:**

The Faculty of Foreign Languages will use the information that you will offer about your registration for the foreign language proficiency exam. You have the right to ask for a copy of the information that we have about you and ask for any incorrect information to be corrected. The personal data are protected according to Law. No. 9887, dated 10.03.2008, amended with Law no. 48/2012 “For the protection of the personal data”.

I hereby confirm that I have understood all of the aforementioned information.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Name /Surname) (Date)**