

GERMAN EXAMINATIONS REGISTRATION FORM



**PRÜFUNGSZENTRUM
GOETHE-INSTITUT**

REGISTERING FOR:

Exam

Goethe Zertifikat - Start Deutsch 1
Goethe-Zertifikat A2
Goethe-Zertifikat B1
Goethe-Zertifikat B2
Goethe-Zertifikat C1
Goethe-Zertifikat C2

Fee

\$ 110
\$ 120
\$ 140
\$ 170
\$ 190
\$ 250

Date of exam:

____ / ____ / ____
Year Month Day

PERSONAL DETAILS

☐ male ☐ female

Family Name: _____	First Name: _____
Date of Birth: _____	Place of Birth: _____
Nationality: _____	Occupation: _____
	Phone (daytime): _____
Address: _____	Phone (evening): _____
	E-Mail: _____
Where did you learn German? _____	For how long? _____

PAYMENT:

Charge to my: ☐ Visa ☐ MasterCard

Credit Card Account Number

Expiration Date

PLEASE NOTE:

Exam fees are non-refundable.

The notification of the examination result generally takes 10 business days.

I have read and accept the exam guidelines, the terms and conditions.

Date: _____ Signature: _____