

REGISTRATION FORM - 2024

Candidate's Code (if you have previously taken the DELF): _____ - _____

DELF Prim' 8-12 years: A1.1 A1 A2

DELF Junior 12-17 years: A1 A2 B1 B2

DELF Tout Public: A2 B1 B2

Information (as it appears on the birth certificate)

Mr. Ms. Mrs.

First Name: _____ Last Name : _____

Date of Birth: _____ (e.g: November 11, 1999)

Place of Birth: City: _____ State: _____

Country of Birth : _____ Nationality(ies): _____

Street Address: _____

Zip Code: _____ City: _____ State: _____

Phone # : _____

Email Address : _____

Parent /Guardian's Name: _____

Parent /Guardian's Phone # : _____

Parent /Guardian's Email Address : _____

Candidate's School Status: Grade if enrolled in school _____

Name and address of the school: _____

Home schooled: Yes No

Registration procedure

1. Submit your registration form via email or to our office before the registration deadline.
2. Pay by check payable to Alliance Française of Westchester Inc.

I understand that the exam fee is non-refundable.

Parent /Guardian’s Signature: _____

Signature: _____

Your registration is confirmed once the payment of your exam fee is processed.

You will receive a notification with time and important information concerning your exam after the registration deadline has passed.

REGISTRATION CALENDAR	Session 1	Session 2
DELFF Tout Public	Deadline May 12, 2024	Deadline November 10, 2024
DELFF Junior	Deadline February 18, 2024	N/A
DELFF Prim	N/A	Deadline April 14, 2024

EXAM CALENDAR		Session 1	Session 2	Price
DELFF Tout Public	A2	June 10	December 9	\$145
	B1	June 11	December 10	\$155
	B2	June 12	December 11	\$190
DELFF Junior	A1	March 11	N/A	\$135
	A2	March 12	N/A	\$145
	B1	March 13	N/A	\$155
	B2	March 14	N/A	\$190
DELFF Prim	A1.1	N/A	May 6	\$125
	A1	N/A	May 7	\$135
	A2	N/A	May 8	\$145