

Recognition Form | Pearson Test of English Academic (PTE Academic)

Please complete using BLOCK CAPITALS for each recognizing program within your institution.
Fields marked * are mandatory

* Institution/Organization _____

* School/Department _____

* Area of Study/Program _____

Score Requirements _____

* Level of Study Associate degree Post Graduate/Graduate
 Certificate Professional Certification/Licensing
 Diploma Undergraduate
 Doctoral/PhD Not applicable

* Authorizing Contact _____

* Title _____

* Email _____

* Telephone _____
(Incl. area code)

Extension _____

* Institution Web Address _____

Institution/Organization Address

* Address 1 _____

Address 2 _____

Address 3 _____

* Country _____

* City _____

State/Province/County _____

* Post Code/Zip Code _____

Program Address (if different)

Address 1 _____

Address 2 _____

Address 3 _____

City _____

State/Province/County _____

Post Code/Zip Code _____

To become a recognizing organization please complete your details

Fields marked * are mandatory

* Appointed PTE Academic Online Results Administrator _____

* Administrator Email Address _____

* Administrator phone (including all codes) _____

* For what purpose(s) do you plan use to the PTE Academic score? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Graduate admissions | <input type="checkbox"/> Screening for scholarships |
| <input type="checkbox"/> Language placement | <input type="checkbox"/> Screening for student exchange programs |
| <input type="checkbox"/> Licensing/Certification | <input type="checkbox"/> Undergraduate admissions |
| <input type="checkbox"/> Other, please specify _____ | |

* Indicate the estimated number of foreign applications that you receive annually.

- | | |
|--|---|
| <input type="checkbox"/> Less than 100 | <input type="checkbox"/> 1001-2000 |
| <input type="checkbox"/> 101-500 | <input type="checkbox"/> 2001-4000 |
| <input type="checkbox"/> 501-1000 | <input type="checkbox"/> More than 4000 |

* How did you hear about the PTE Academic? (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Pearson Representative |
| <input type="checkbox"/> Colleague | <input type="checkbox"/> Pearson Website |
| <input type="checkbox"/> Exhibition/Conference | <input type="checkbox"/> Presentation |
| <input type="checkbox"/> Pearson Brochure | <input type="checkbox"/> Student |
| <input type="checkbox"/> Pearson Event | <input type="checkbox"/> Other, please specify _____ |

Pearson will send you an email notification within 2 to 3 days of receipt and verification of your information.

Pearson may use the name and score requirements of institutions that recognize scores in official Pearson documentation. No personal names or contact details will be published.

Yes, I want to join the PTE Academic mailing list.

* I am authorized to accept the PTE Academic for my institution and I accept the terms and conditions.

Signature _____ Date _____

Return this completed form to:

USA | Canada

Pearson Language Tests
Attn: Kelsey Miller
501 Boylston Street, Suite 900
Boston, MA 02116
USA
Fax nr: 617-671-2285

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PTE Academic

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