



**e-TEFAQ – Test D’Évaluation de Français adapté au Québec
Registration Form
Alliance Française de San Diego**

Session Date (MM/DD/YYYY): _____

Last Name: _____ First Name: _____

Gender: _____ Native Tongue: _____

Citizenship: _____ Date of Birth (MM/DD/YYYY): _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email (please print): _____

Motivation: Immigration Quebec Canadian Citizenship Other

Sections	AFSD members	Non-members
Compulsory Sections (CO and EO)	\$200	\$225
Optional Sections* (CE and EE)	\$90 (\$50 each)	\$100 (\$55 each)
Complete Test (all sections)**	\$260	\$295

* If registering for an optional section, please indicate: Written Expression (EE)
 Written Comprehension (CE)

Once a registration is submitted, no refund or credit can be made under any circumstance (unless the Alliance Française de San Diego has to cancel the session of tests you are registered for).

I have read and agreed with the e-TEF policies of the Alliance Française de San Diego

Name: _____

Signature: _____ Date: _____

Please send this registration form with your payment to: certifications@afsandiego.org

Payment Method: Check # _____ (payable to AFSD)
 Credit card: (call 858) 550-0144

**Alliance Française de San Diego
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