

REQUEST FOR RE-EVALUATION

Candidates who wish to have their scores re-evaluation must submit this request form with payment within twenty working days of the test. Telephone requests are NOT accepted. There is a \$30 fee to check writing, \$30 fee to check speaking, \$15 to check listening, and \$15 to check reading.

Family Name: _____

First Name(s): _____

Date of Birth (year-month-day): _____

E-mail Address: _____

Date on which CanTEST was taken: _____

City in which CanTEST was taken: _____

I wish to have my scores re-evaluated in the following area(s):

- Writing
- Speaking
- Listening
- Reading

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Writing:	\$30 received <input type="checkbox"/>	<input type="checkbox"/> Cash
Speaking:	\$30 received <input type="checkbox"/>	<input type="checkbox"/> Money order
Listening:	\$15 received <input type="checkbox"/>	<input type="checkbox"/> Certified cheque
Reading:	\$15 received <input type="checkbox"/>	

Approved by: _____ Date: _____