idp | IELTS
PROUD CO-OWNER OF IELTS

Request for Refund or Test Date Transfer Form

PERSONAL DETAILS

TITLE:	
GIVEN NAMES:	
FAMILY NAME:	
ADDRESS:	

TELEPHONE:		EMAIL:	

CHANGE REQUESTED:

Request is for (tick one box): ☐ REFUND ☐ TEST DATE TRANSFER

CENTRE NAME / NUMBER:	
TEST DATE REGISTERED FOR:	/ /
MODULE REGISTERED FOR:	☐ ACADEMIC ☐ GENERAL TRAINING

Please select the test that you registered for:

☐ IELTS (Paper Based) ☐ Computer-delivered IELTS ☐ IELTS for UKVI (Paper Based)

☐ IELTS for UKVI (Academic) (Computer-delivered) ☐ IELTS Life Skills

PREFERRED NEW TEST DATE:	/ /
PREFERRED NEW MODULE:	☐ ACADEMIC ☐ GENERAL TRAINING

Please select the test that you wish to transfer to:

☐ IELTS (Paper Based) ☐ Computer-delivered IELTS ☐ IELTS for UKVI (Paper Based)

☐ IELTS for UKVI (Academic) (Computer-delivered) ☐ IELTS Life Skills

TEST TAKER STATEMENT

Please detail your reasons for applying for a refund or a test date transfer.

In case of medical reasons, this form must be accompanied by an original medical certificate. For other reasons, please attach relevant documentation/evidence (police report, military service notice, death notice). Attach an extra sheet if there is insufficient space.

TEST TAKER SIGNATURE:		DATE:	/ /
RECEIVED BY:		DATE:	/ /

TEST CENTRE USE ONLY:

Request (please select): ☐ APPROVED ☐ NOT APPROVED

AUTHORISED BY:
(IELTS ADMINISTRATOR)

DATE: / /