CIOL Qualifications Diploma in Translation Exam Entry Form

January 2023

Before completing this entry form, please ensure you have read our <u>Qualification Specification</u> and <u>Key dates document</u>. Please email your entry form to info.diptrans@ciol.org.uk.

To sit at a different Exam Venue please submit your Entry Form directly to the Exam Venue.

Please note all required fields must be complete for the entry form to be accepted.

SECTION 1A - PERSONAL DETAILS

CANDIDATE NUMBER To be completed if you have previously sat							
a CIOL Qualification exam							
TITLE (tick as appropriate)	Mr	Ms	Mrs	Miss	Dr		Other
FIRST NAME(S)							
LAST NAME(S)							
DATE OF BIRTH	(dd/mm/yyyy)						
CONTACT NUMBER(S) inc. country code							
EMAIL ADDRESS							
ADDRESS (Please add the address in which you will be located on the day of your exam)							
SECTION 1B - EQUAL	ITY, DIVE	RSITY &	INCLUSION I	NFORMATI	ON (C	PTIO	NAL)
NATIONALITY							
GENDER (please tick)	Male	Fe	male	Prefer not	to say		
ETHNIC GROUP (please tick one)	White UK Herita		nite ropean	White Other (kno	wn)	White Type	e not known
This information is requested for equal opportunities monitoring	Black Caribbea Heritage	an Afi	ack rican Heritage	Black Other		Chine	ese
only.	Indian	Pa	kistani	Banglades	hi	Othe	r
				Prefer not	to say ((please	e tick)

SECTION 2A - EXAM DETAILS

Please refer to the list of available language combinations on the CIOL website.

Please note the difference between the Source Language and Target Language:

- Source Language Language from which you will be translating
- Target Language Language into which the text is to be translated

Language selection			
Source Language			
Target Language			

Unit(s) selection - Please tick all the units you would like to sit:			
Unit 01	Unit 02	Unit 03	

SECTION 3 - REASONABLE ADJUSTMENTS

Do you require Reasonable Adjustments under the Equalinate Act 2010?	Yes	If yes, please complete the <u>Reasonable Adjustment form</u> and forward it to CIOLQ Virtual Centre or your Exam Venue with your Entry application form. To view our Reasonable Adjustment policy please click <u>here</u> .
(Please tick as applicable) Reasonable Adjustments must be requested for each exam - Reasonabl Adjustments cannot be carried forward from previous years	No	In order to request Reasonable Adjustments, you will need to provide medical evidence issued within the last six months . This entry will only be accepted and processed if this section is completed correctly.

SECTION 4A - PAYMENT INFORMATION

1 - Exam Fees

Unit 01	£440.00
Unit 02	£325.00
Unit 03	£325.00
All three units*	£650.00

^{*}Exam Fees are capped at £650.00 - if the total cost of the units you are sitting exceeds this amount the maximum payment is still £650.00.

2 - CIOLQ Virtual Centre Fee

Unit 01	£60.00
Unit 02	£60.00
Unit 03	£60.00
Full CIOLQ Virtual Centre Fee	£180.00

^{*} All assessments conducted via the CIOLQ Virtual Centre are online only using our online delivery platform. Please note to register two fees are payable by all candidates (1 - Exam Fees plus 2 - CIOLQ Virtual Centre Fee). We are unable to process applications received with incomplete fees.

SECTION 4B - PAYMENT METHOD

	Bank Transfer (BACS)	Payment reference:
I wish to make payment via: (Please tick as appropriate)	Account name: IoL Educational Trust Bank name: Royal Bank of Scotland Sort code: 16-00-15 Account no: 23122157 Swift Code (BIC): RBOSGB2L IBAN no: GB58RBOS 16001523122157	
	Credit/debit card	Select this option and a member of the Client Services Team will email a secure payment link.

SECTION 5 - DECLARATIONS

- 1) Candidates must ensure that they are fully prepared for the level and format of the exam for which they are entering. Please read the Qualification Specification published on our website here. It is recommended that all candidates complete a preparation course and practice using past papers.
- 2) Completed Exam Entry Forms received without full payment will <u>not be processed</u>. Payment can be made either by BACS or card (see section 4B for payment information).
- 3) Where a minimum number of candidates is required for a particular language combination, and where that number has not been reached by the close of registration, CIOLQ reserves the right to withdraw that particular language combination. In such cases a full refund of fees received will be arranged.

SECTION 6 - SIGNATURE

To be completed by all candidates

By signing and submitting this CIOL Qualifications Exam Entry Form, including paying the appropriate fees, you agree to abide by all candidate regulations and the declarations listed above in Section 5.

Your data: The information you provide will be used by CIOL Qualifications to create a candidate record and will be used to manage your entry and fulfil the benefits and services you expect as a CIOL Qualifications exam candidate. Your data will not be sold to any other third party without your consent.

I have read and agree to abide by all candidate regulations and the declarations listed in Section 5.

Candidate signature:

If completing electronically, please type your name in full.

Date:

Contact: Client Services Team Tel: +44 (0)20 7940 3100 Email: info.diptrans@ciol.org.uk Web: www.ciol.org.uk