



See the back of this form for instructions. Mail or fax your completed form to the Regional Registration Center (RRC) for the country in which you plan to test (see pages 21-23). **Do not send this form to ETS.**

Please print all information clearly in English characters. DO NOT include accent marks or any other special characters. Use black ink to complete the form.

Confirmation No.: Remittance No.: Test Date: Test Time: Test Center:

Test Center: First choice

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 _____ Second choice

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Test Center Number City name of test center Test Center Number City name of test center

Test Date (MM/DD):
for example, May 21 =

0	5
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 -

2	1
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1st choice

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--	--

MM - DD

2nd choice

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 -

--	--

MM - DD

3rd choice

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 -

--	--

MM - DD

4th choice

--	--

 -

--	--

MM - DD

5th choice

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 -

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MM - DD

First (Given) Name (as on photo ID document):

Middle Initial

[illegible][illegible][illegible][illegible][illegible][illegible]

Home Phone
(Include Country & City Code):

[illegible][illegible]

Date of Birth (MM-DD-YYYY):		-		-				
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Passport Number
(national certificate of citizenship
or national ID card):

Payment Method (Fill in one circle)

Type of Currency: _____ Amount Enclosed: _____ to **ETS-GRE**. See back cover of the *Bulletin* for preferred forms of payment.

NOTE: Certified checks, money orders, and personal checks must be payable to **ETS-GRE**. See back cover of the *Bulletin* for preferred forms of payment.

☐ Voucher Number

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☐ Certified Check (enclosed)

☐ VISA®

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☐ Money Order (enclosed)

☐ MasterCard® ☐ UNESCO Coupons (enclosed)

☐ American Express® ☐ Personal Check (enclosed)

Credit Card Expiration Date:			-			(MM-YY)
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[illegible]

I hereby agree to the general conditions set forth in the *2003–2004 GRE Information and Registration Bulletin*, and I agree to the policies and procedures related to computer-based testing, specifically those concerning test administration, payment of fees, and reporting of scores. I certify that I am the person who will take the test at the center and whose name and address appear on this form.

Signature: _____ Date: _____



Instructions for Completing the International Test Scheduling Form

IMPORTANT: If the form is not properly filled out (contains incomplete information, unclear letters, or non-English characters), it MAY cause a delay in processing your registration and appointment request. Please read the instructions carefully.

Completing the Form

- Use black ink.
- The name you enter on the form **MUST** match the name on the identification document you will present at the test center. See "Identification Requirements" below.

Payment Information

- Fax or mail this form if you are paying with a credit card or supplying a voucher number.
- Mail this form if you are paying with a certified check, money order, personal check, or other physical payment method.
- See the back cover of the *Bulletin* for a list of preferred forms of payment and acceptable currencies.
- If you do not submit payment with this form, your test appointment will not be made.

Test Date and Center Information

Note: The GRE General Test is not given every day at all test centers. Contact your Regional Registration Center (RRC) for the latest information (see pages 21–23 in the *Bulletin*).

- Indicate your first 5 test date choices by month (MM) and day (DD); for example, May 21 would be listed as 05/21.
- Fill in the number of the test center where you want to test.
- Write the name of the city where the test center is located.
- A second-choice test center may also be indicated.

Submitting This Form

By Mail

- If requesting an appointment at a permanent test center, the appropriate RRC must receive this form **AT LEAST 3 WEEKS PRIOR TO YOUR FIRST-CHOICE TEST DATE**.
- Be sure to include proper payment with this form.
- RRC mailing addresses are on page 21 of the *Bulletin*.

By Fax

- If requesting an appointment at a permanent test center, the appropriate RRC must receive this form **AT LEAST 7 DAYS PRIOR TO YOUR FIRST-CHOICE TEST DATE**.
- Be sure to include your credit card number or voucher number on this form.
- RRC fax numbers are on page 21 of the *Bulletin*.

Scheduling Process

- The RRC will try to schedule your first-choice test date, then your second-, third-, fourth-, or fifth-choice test date in chronological order at your first-choice test center.
- If you select a second-choice test center and the RRC is unable to schedule you at your first-choice center, the RRC will try to schedule your first-choice, then second-, third-, fourth-, or fifth-choice test date at your second-choice test center.
- If none of the test dates requested are available, the RRC will try to schedule you for a test date close to one of your choices.
- If you have a problem with the appointment scheduled for you, contact your RRC.

Retaking the Test

- You may take the General Test (computer-based and/or paper-based) once per calendar month up to 5 times in a 12-month period.

Identification (ID) Requirements

- Be sure that the name you provide for registration matches the **VALID** ID you will present on the day of the test (see page 12 in the *Bulletin*).
- If you fail to present the correct ID or if your name does not match the registration and ID, you will be **TURNED AWAY** from the test center.

Confirmation Letter

- If you do not receive confirmation of your appointment by e-mail, fax or mail, you must call the RRC **AT LEAST 3 BUSINESS DAYS PRIOR TO YOUR FIRST-CHOICE TEST DATE**.
- If you miss your appointment and did not call the RRC, your test fee will not be refunded.