



2009-10 INTERNATIONAL TEST SCHEDULING FORM (Computer-Based General Test)

To register online, visit www.ets.org/gre/grereg.

Do NOT use this form if you plan to test in the United States, Canada, Guam, U.S. Virgin Islands, or Puerto Rico.

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 page 20). 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.

FOR OFFICE USE ONLY:

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

Specify 5 dates in order of preference and test center location(s).

Test Center:	First choice	<input type="text"/>	Second choice	<input type="text"/>	
		Test Center Number	City name of test center	Test Center Number	
				City name of test center	
Test Date (MM/DD):	1st choice	2nd choice	3rd choice	4th choice	5th choice
for example, May 21 =	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	MM - DD	MM - DD	MM - DD	MM - DD	MM - DD

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

Last (Family/Surname) Name (as on photo ID document):

Address Line 1:

Address Line 2:

City:

Country:

Primary Phone (Include Country & City Code): Postal Code:

Alternate Phone (Include Country & City Code):

Fax Phone:

E-mail Address:

Date of Birth (MM-DD-YYYY):

Passport Number (national certificate of citizenship or national ID card):

Payment Method (Fill in one circle)

Type of Currency: _____ Amount Enclosed: _____

NOTE: Certified checks, money orders, and personal checks must be payable to ETS-GRE. See page 11 of the *Bulletin* for preferred forms of payment.

- | | |
|--|--|
| <input type="radio"/> Voucher Number <input type="text"/> | <input type="radio"/> Certified Check (enclosed) |
| <input type="radio"/> American Express® <input type="text"/> | <input type="radio"/> Money Order (enclosed) |
| <input type="radio"/> Discover® | <input type="radio"/> UNESCO Coupons (enclosed) |
| <input type="radio"/> JCB® | <input type="radio"/> Personal Check (enclosed) |
| <input type="radio"/> MasterCard® | |
| <input type="radio"/> VISA® | |

Expiration Date: (MM-YY)

Card Holder Name:

I hereby agree to the conditions set forth in the 2009-10 GRE Bulletin, specifically those concerning test administration, payment of fees, the reporting of scores, and the confidentiality of test questions. 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/debit 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 pages 11–12 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 page 20 in the *Bulletin*).

- Indicate your first five 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

- The appropriate RRC must receive this form **AT LEAST THREE WEEKS PRIOR TO YOUR FIRST-CHOICE TEST DATE**.
- Be sure to include proper payment with this form.
- **DO NOT MAIL** this form to ETS. RRC mailing addresses are on page 20 of the *Bulletin*.

By Fax

- The appropriate RRC must receive this form **AT LEAST SEVEN DAYS PRIOR TO YOUR FIRST-CHOICE TEST DATE**.
- Be sure to include your credit/debit card number or voucher number on this form.
- RRC fax numbers are on page 20 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 within 24 hours of receipt of your registration confirmation.

Retaking the Test

- You may take the General Test (computer-based and/or paper-based) only *once per calendar month*, and no more than *five times* within any 12-month period. This applies even if you canceled your scores on a test taken previously.

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 pages 13–14 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 THREE 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.