

TEPTH PTE-A REGISTRATION FORM

- The TEPTH PTE-A registration service is offered by The Exam Preparation & Testing House FZCO for the convenience of the test-takers. We hold no responsibility regarding any issues related to test results or scoring or other. We have no control or involvement in the test itself, the scoring of the test or the release of the results.
- Candidates registering using this service and others who register themselves online will be treated the same while taking the test at our center.
- The registration service is entirely voluntary and any candidate can book their test at the centre without incurring the additional fee. Any candidate who wishes to use TEPTH registration service offered by our staff will be charged an additional (AED 150) on top of the exam fee.
- The test center bears responsibility of any incorrect information filled out during registration by one of our staff.
- The registration service will go through two steps: 1-Creating the account 2-Registering for the exam (the second step may be required to be done the following day depending on the verification time of the account, the center will take the candidate's permission to log into the account the next day to complete the registration process).

* I hereby acknowledge that I have read, understand and agree to the terms and conditions outlined above.

* I hereby confirm that I have checked all my personal data and details that were used for registration and they are correct, accurate and matching my ID used for this program.

* I hereby confirm that I have given the permission to the centre to log into my account to complete my registration.

* First Preferred Test Date & Time: _____

* Second Preferred Test Date & Time: _____

* Full Name: _____

* Contact Number: _____ E-mail: _____

* City: _____ Province: _____

P.O.Box: _____ Postal Code: _____

* Country: _____

* Date : _____ * Signature: _____

FOR OFFICE USE ONLY

Candidate's ID type and number used for registration: _____

Original Passport Emirates National ID GCC National ID Driving License Military Card

Date : _____ Test Date & Time: _____

Receipt Number: _____ Signature: _____