

CAMBRIDGE ESOL EXAMINER SUPPLEMENTARY FORM

Use this form if you are already a Cambridge ESOL Examiner and you wish to examine additional levels (Complete Sections 1, 2, 3, 4 and 5) OR

if you have previously submitted an application form and have been asked to supply details of further training and/or experience in order to meet Minimum Professional Requirements (Complete Sections 1, 3, 4 and 5)

If it is more than three years since you submitted an Application Form and you are not currently examining for Cambridge ESOL, it may be more appropriate to complete a new Application Form so that we have up-to-date information

1 Name of Examiner

UCLES ID/REF

2 Please tick box(es) to indicate **additional** level(s) for which you are applying

KET	S	PET	S	W	FCE	S	W	CAE	S	W	CPE	S
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BEC P	S	W	BEC V	S	W	BEC H	S	W	ILEC	S	W	Skills for Life	S	W
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3 Please add here any information relevant to this application with dates eg experience in Business English teaching for BEC, current teaching relevant to other levels such as KET, CPE, examining experience overseas

Do you currently work for another EFL/ESOL examining board?* **Yes / No** (delete as applicable)

If so, please state which

* Please see the Note on page 1 of the Notes to Accompany Examiner Application Forms

4 HOME ADDRESS

NUMBER	STREET	TOWN	POST (AREA) CODE
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Home Tel

Fax

Mobile

E-mail

Work Tel

5 I confirm that the information given on this form is correct

Signature of applicant

Date

Approved by Cambridge ESOL/STL

Date

Data input to Database by

on



UNIVERSITY of CAMBRIDGE
ESOL Examinations

English for Speakers of Other Languages