**Application form for the Language test appendix to the**

**the Code of Conduct International Student Higher Education**

**Practical information**

1. Name of the organization offering the language test:
2. Address, postcode, town and country:
3. Website of the organization:
4. Name contact person:
	1. Phone number:
	2. Email address:

**Language test(s)**

1. Name of the language test(s) for which the language test provider submits the application:
2. Level of language test scores in relation to the table such as included in the Language test appendix to the Code of Conduct, by level:
	1. For admission to preparatory education with a duration of six to twelve months:
	2. For admission to preparatory education with a duration of up to six months:
	3. For admission to education at Bachelor’s and Master’s level or premaster’s level:

**Validating authority**

In case that a validating authority other than Hobéon is proposed, the following question should be answered.

1. a. Name validating authority:
b. Please add a description of the validating authority with this application.

Important to note: the language test provider must provide evidence, which shows that the validating authority and the experts they use meet the basic requirements set forth in the process description.

**By signing this application form the language test provider expresses its desire to be included in the Appendix Language Tests to the Code of Conduct.**

**Date:**

**Signature:**

Please send the completed form to the Office of the National Commission :

info@internationalstudy.nl