

ETS® Exams Rescoring Request Form

Please PRINT CLEARLY all information requested below:

Examination Information						
LXamiliation information	•					
Examination Type:	□TOEIC®	□TOEIC Bridge®	□TC	DEFL Junior® □T	OEFL Primary®	
Test Location:				Test Date:		
Candidate Information						
Last/Family Name:						
First Name:						
Father's Name:						
Date of Birth:						
Mailing Address:						
City:				Postal Code:		
Email Address:						
Telephone:				Mobile:		
Date of Request:				Signature:		

Rescoring Fee

The fee for this service is 35€. This must be deposited at the **Alpha Bank**.

The bank account number is 441-00-2002-000221,

(IBAN: GR4401404410441002002000221).

If the rescore is higher than the initial score, rescoring fees will be refunded.

In the case of interbank transfers, any expenses are born by the customer and not the Hellenic American Union. For this reason, please select **"Expenses OUR"** and **not** "Expenses SHA"

Submit your Rescoring Request Form There are **three alternative ways** to submit your Rescoring Request Form along with the deposit slip from the bank:

- 1. fax it to the following number: 210 3634200.
- 2. email it to: exams@hau.gr
- 3. or mail it to: Hellenic American Union, Didotou 15, 106 80 Athens.

Results

Processing of your request will take approximately 2 weeks. The results will be mailed to you at the address you specified above.

Rescoring Period

The rescoring request should be submitted up to 30 calendar days after the announcement of the results.

Upon signing of this document, I hereby:

- Request rescoring of candidate's exams, as per above.
- Confirm that the above information is accurate and correct.
- Confirm that the candidate is made aware of and complies with the examination regulations of the Hellenic American Union
 Center for Examinations and Certifications and undertakes the responsibility to comply with the specific regulations.
 Examination regulations have been made publicly available at http://www.hau.gr/?i=examinations.en.examination-regulations. Any questions on the regulations should be addressed to the Hellenic American Union Center for Examinations and Certifications.
- Confirm that I am aware of the processing of personal data by the Hellenic American Union (https://www.hau.gr/el-gr/prosopika-dedomena/summetexontes-se-eksetaseis) and by Educational Testing Service
 (https://www.ets.org/legal/privacy)

Candidate's name - Parent's/Guardian's name:	Date: Signature	e:
	Please sig	gn to validate the application