鲁尔都市孔子学院

新 HSK 报名表

Confucius Institute Metropolis Ruhr

Registration Form HSK Test

(Please use block capital letters to fill in this form)

证件姓名 Surname																			
证件姓名 First Name																			
中文姓名 Chin. Name (if available)																			
国籍 Nationality											性别 Gender			男 M☐ 女 F☐					
出生日期 Date of birth	____年 yyyy ___月 mm ___日 dd										母语 First Language								
证件类型 Piece of Identification	☐ Identity Card ☐ Passport																		
证件编号 Identity Number																			
通信地址 Mailing Address	Street/House Number: Postal code/ZIP code: City:																		
联系电话 Phone																			
E-Mail																			
学习汉语年限 How long have you been studying Chinese?	_____年（Year）____个月（Month）																		
报考科目 Test and Favored Test Level	☐ **HSK written** ☐ HSK（1 级） ☐ HSK（2 级） ☐ HSK（3 级） ☐ HSK（4 级） ☐ HSK（5 级） ☐ HSK（6 级） ☐ **HSKK oral** ☐ Elementary（口试初级） ☐ Intermediate（口试中级） ☐ Advanced （口试高级）																		

I confirm my agreement that the Confucius Institute Metropolis Ruhr shares all data related to this language test with the Council of the Confucius Institute Headquarters (Hanban) as well as Chinese Testing International Co Ltd in Beijing in order to issue a certificate confirming my participation.

I confirm my agreement that the Confucius Institute Metropolis Ruhr processes my personal data in order to arrange for my registration and participation in the Chinese language test and to issue a certificate confirming my participation. I am aware that I can withdraw this consent at any time.

Date/Signature (Parent/Guardian if underaged)