Recognition form
Please remember to publicise acceptance of our qualifications and tests on your website and in course literature.

## Name:

Position/job title:

Email address:
Address of institution/organisation:

Name of institution/organisation:

Website address of institution/organisation:

Please specify which qualifications and tests your institution recognises for foundation, undergraduate and postgraduate courses, and indicate the purpose of recognition by ticking the relevant boxes below:

|  | Purpose |  |  |  |  | Level of Study |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Admission | Credits or exemptions | Exit/ Graduation | Teacher recruitment | Adoption | Foundation | Undergraduate | Postgraduate |
| A2 Key | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| B1 Preliminary | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  |  |  |
| B2 First |  |  |  |  |  | $\square$ | $\square$ |  |
| C1 Advanced |  |  |  |  |  |  | $\square$ |  |
| C2 Proficiency |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| B1 Business Preliminary |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |  | $\square$ |
| B2 Business Vantage |  | $\square$ |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| C1 Business Higher |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| Linguaskill Business |  | $\square$ |  | $\square$ |  | $\square$ |  | $\square$ |
| Linguaskill General |  | $\square$ |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| IELTS |  |  | $\square$ | $\square$ | $\square$ | $\square$ |  |  |
| TKT |  |  |  | $\square$ | $\square$ | $\square$ | $\square$ |  |
| CELTA |  | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |
| ICELT |  | $\square$ | $\square$ | $\square$ |  | $\square$ | $\square$ | $\square$ |
| Delta | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ | $\square$ |

Other (please comment):

I confirm I am authorised to act for the above organisation and allow Cambridge Assessment English to publicise the organisation's English language requirements, as specified above. I agree to the use of the organisation's name and accepted Cambridge English qualifications and tests in promotional literature by Cambridge Assessment English. I will be the main contact for this organisation and understand my details will be processed in line with the Privacy Policy atcambridgeenglish.org/data-protection.

## Name:

