



Foreign Language Proficiency Examination Form			
Department		Application Numbers (do not write)	
Name		Student Number	
E-mail		Phone Number	
Certificates		Test Result(s)/Score(s)	
Cambridge Main Suite		<input type="checkbox"/> PET <input type="checkbox"/> FCE <input type="checkbox"/> CAE <input type="checkbox"/> CPE	
BULATS		<input type="checkbox"/> ALTE Level 2 <input type="checkbox"/> ALTE Level 3 <input type="checkbox"/> ALTE Level 4 <input type="checkbox"/> ALTE Level 5	
FLPT		<input type="checkbox"/> Writing test 195+ points, speaking test S-2 <input type="checkbox"/> Writing test 240+ points, speaking test S-2+ <input type="checkbox"/> Writing test 315+ points, speaking test S-3	
DELE		<input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2	
GEPT		<input type="checkbox"/> Intermediate first stage <input type="checkbox"/> Intermediate second stage <input type="checkbox"/> High-Intermediate first stage <input type="checkbox"/> High-Intermediate second stage <input type="checkbox"/> Advanced first stage <input type="checkbox"/> Advanced second stage <input type="checkbox"/> Superior first stage <input type="checkbox"/> Superior second stage	
TOEFL-IBT		<input type="checkbox"/> above score 47 <input type="checkbox"/> above score 71 <input type="checkbox"/> above score 83 <input type="checkbox"/> above score 109	
TOEIC		<input type="checkbox"/> above score 550 <input type="checkbox"/> above score 750 <input type="checkbox"/> above score 880 <input type="checkbox"/> above score 950	
IELTS		<input type="checkbox"/> Band 4 <input type="checkbox"/> Band 5.5 <input type="checkbox"/> Band 6.5 <input type="checkbox"/> Band 7.5	
JLPT		<input type="checkbox"/> N1 <input type="checkbox"/> N2 <input type="checkbox"/> N3 <input type="checkbox"/> N4 <input type="checkbox"/> N5	
Other(s): _____		Grade / Score: _____	
Checker: (Do not write) Date : / /			
Record in System: (Do not write)			