IELTS™

Application for Additional Test Report Forms

For Office Use Only					
Received:		Initials:		Student #:	
Sent:		Initials:		Receipt #:	
Courier Track #:					

Candidate Information

Family Name

First Name(s):

Address:

Tel Number: Email:

Date of Birth (day/month/year):

Passport or PR Card Number: **This document must be shown before a TRF can be issued.**

Most Recent Test Information

Centre Number:	CA417	Centre Name:	Heartland International English School IELTS Test Centre
Candidate Number:		Location:	
Test date: (day/month/year):			

Institute Information

Name of Person/ Department:

Name of University/Organization:

Address of Institution:

Tel Number:

Application/Student Number:

Courier Required: ☐Yes   ☐ No

I certify that the information on this form is complete and accurate to the best of my knowledge and authorize the IELTS Test Partners to forward a copy of my TRF to the department(s) or institute(s) listed above.

Signature: _____ Date: (day/month/year): _____

IELTS Test Centre at Heartland
Official IELTS Test Centre
ielts@heartlandenglish.com
Fax: 1-204-989-2232
www.heartlandenglish.com/ielts/

Credit Card Payment Authorization Form

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FEE Schedule			
	Unit Price	**Quantity**	**Total**
IELTS TRF	$20.00 Ea.		$
Courier Fee (Within Canada)	$30.00 Ea.		$
Courier Fee (United States)	$50.00 Ea.		$
Includes Tax		**Total**	$

For payment by Visa or Mastercard, please complete the following information, then email the form to ielts@heartlandenglish.com or fax the form to +1-204-989-2232.

Most Recent Test Date: _____
(YYYY/MM/DD)

❑ Electronic/Mail Only   ❑ Courier Required

Email: _____

Candidate Name: _____ _____

Cardholder's Name: _____ _____
(First name)   (Last name)

Credit Card: ❑ MasterCard ❑   Visa

Credit Card Number: _____

Expiry Date: ___ / ___

I authorize Heartland International English School to charge $ _____ CAD to my credit card.

Signature of Card Holder: _____   Date: _____