

Enquiry on Results – Application form

Centre Number: _____

Test Date: _____

Dear test taker,

To request a re-mark of your results, please complete this form and return to the address shown below. Please note that you **must** include your original IELTS Test Report Form.

You may choose to have one or more test modules re-marked. You will be notified of the re-mark result within 2-4 weeks of receipt of your application.

The re-mark fee is A\$176 (inclusive of GST). You will receive a full refund if your result is changed to a higher band score and you will be issued with a new Test Report Form. Your existing Test Report Form will be returned if there is no change.

Please note that you must apply for a re-mark within six weeks of the test date.

Candidate Number: _____ Address: _____
Family Name: _____
Given Name: _____ Suburb/Town: _____
E-mail: _____ State: _____ Postcode: _____
Mobile Telephone: _____

Please select the module(s) to be remarked: Listening Reading Writing Speaking All Modules

Signature: _____ Date: _____

Test fee: A\$176.00

Payment method: Credit card - please complete all details below Bank cheque - cheque must be payable to **IELTS Australia**
 Money order - order must be payable to **IELTS Australia** - cheque must be drawn on an Australian Bank
- order must be issued by Australia Post - personal cheques will not be accepted

Credit Card Type VISA MasterCard

Card Holder Name: _____ (Name as it appears on the card)

Credit Card Number: _____

Expiry Date: Month Year CVV*: *CVV is an anti-fraud security feature. For Visa/Mastercard, the three-digit CVV number is printed on the signature panel on the back of the card immediately after the card's account number.

Payment Authority

I, the Cardholder, authorise IELTS Australia Pty Ltd to charge my credit card as listed above on behalf of the above IELTS test candidate ("Candidate") for the purpose of the Candidate requesting a re-mark of their IELTS test. I acknowledge that this Payment Authority will result in a Re-mark Fee of the amount shown above being charged to my credit card as identified above and that this charge will appear on my credit card statement as a payment to IELTS Australia Pty Ltd.

Signature: _____ Date: _____
(Cardholder signature)

Complete this form and mail with your original IELTS Test Report Form (NOT A PHOTOCOPY) to:

RE-MARK APPLICATIONS
PO BOX 16154, Collins Street West VIC 8007
IMPORTANT: This application form MUST reach our office by the due date.