



CANDIDATE REGISTRATION FORM

This form must be used to register candidates for all AISABE qualifications. A combination of different qualifications can be added to the same form. All columns must be completed. Candidates' names should be recorded as you would like them to appear on the qualification certificate. Fees for candidate registration can be found on the AISABE fees list.

Centre name:		AISABE Centre Number:	
Centre address and post code:			

Candidate Reg No*	Qualification title and level	First name	Last name	Home address	Ethnic origin**	Date of birth (DD/MM/YYYY)	Gender M/F	Particular assessment requirements (Y/N)	Credit tariff***

*** If candidate is already registered for an AISABE qualification, please include their registration number here**

**** Ethnic origin:** **W** (white – British, Irish, other white background); **M** (mixed – white and black Caribbean, white and black African, white and Asian, other mixed background); **A** (Asian or Asian British – Indian, Pakistani, Bangladeshi, other Asian background); **B** (black or black British – Caribbean, African, other black background); **C** (Chinese or other ethnic group – Chinese, any other)

Please return to:
 AISABE, Suite # 2.2, Coventry House, Coventry Road, Ilford, IG1 4QR
 Email: enquiries@aisabe.org.uk
 Tel: 08448099220