



No \_\_\_\_\_ (Staff only)

## TOEFL ITP Application form

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Full name (Mr. / Mrs. / Miss) \_\_\_\_\_

Type of applicant

1. HU student Major \_\_\_\_\_

2. HU personnel Department \_\_\_\_\_

3. General people Organization \_\_\_\_\_

Contact number \_\_\_\_\_

Email \_\_\_\_\_

Purpose of taking the test \_\_\_\_\_

- Test date
- 1. 8<sup>th</sup> September 2019
  - 2. 10<sup>th</sup> November 2019
  - 3. 9<sup>th</sup> February 2020

Signature \_\_\_\_\_

( \_\_\_\_\_ )

Remarks:

1. All students (excluding those of other institution) enclose a copy of your student ID card.
2. For HU staff, enclose a copy of HU staff card.
3. Others attach a copy of citizen ID card or passport.