



## Speaking Examiner Application Form

**Note to the applicant Speaking Examiner:** This form can be used to apply for the role of Speaking Examiner at a Cambridge Assessment English centre. Please fill this in and return it to the centre that sent you it. Any information from this form which is submitted to us will be kept securely by Cambridge English and will be used only for the purpose of quality assurance.

### 1: Personal details

|                      |   |      |                               |                                 |                                     |                                       |
|----------------------|---|------|-------------------------------|---------------------------------|-------------------------------------|---------------------------------------|
| <b>Title</b>         | <b>First name(s) In CAPITAL Letters</b> |      |                               |                                 | <b>Surname (In CAPITAL Letters)</b> |                                       |
|                      |   |      |                               |                                 |                                     |                                       |
| <b>Date of birth</b> |   |      | <b>Gender</b>                 |                                 | <b>Nationality</b>                  | <b>Former Surname (if applicable)</b> |
| Day                  | Month                                   | Year | Male<br><input type="radio"/> | Female<br><input type="radio"/> |                                     |                                       |
| <b>Email address</b> |   |      | <b>Telephone number</b>       |                                 |                                     |                                       |

### 2: Qualifications and English language proficiency

|  |                           |                          |
|--|---------------------------|--------------------------|
| <b>Do you have a Degree or equivalent?</b><br><b>If yes, please give details below</b> | <input type="radio"/> Yes | <input type="radio"/> No |
| Name of qualification and subject  |                           |                          |
| Institution name   |                           |                          |
| Month/year awarded   |                           |                          |

|  |                           |                          |
|--|---------------------------|--------------------------|
| <b>Do you have a Teaching Qualification?</b><br><b>If yes, please give details</b> (please select the most relevant one) | <input type="radio"/> Yes | <input type="radio"/> No |
| Name of qualification and subject  |                           |                          |
| Institution name and location  |                           |                          |
| Month/year awarded   |                           |                          |



### 3: English Language proficiency

|  |                              |                             |
|--|------------------------------|-----------------------------|
| <b>Is English your first language?</b>   | Yes<br><input type="radio"/> | No<br><input type="radio"/> |
| If English is not your first language, please specify  |                              |                             |
| What is your English language level? (Please state the CEFR level if possible)   |                              |                             |
| What proof can you give of your English language level?<br><br>For example, English language exam taken (include details about the level, exam board etc.), language proficiency interview conducted by TL |                              |                             |

### 4: English Language Teaching Experience

Please give your most recent relevant experience, up to a maximum of three roles

| Date (month/year) | Employer (Name / Location) | Duties (include details of ages and level taught) |
|-------------------|----------------------------|---|
| From              |                            |   |
| To                |                            |   |
| From              |                            |   |
| To                |                            |   |
| From              |                            |   |
| To                |                            |   |
| From              |                            |   |
| To                |                            |   |
| From              |                            |   |
| To                |                            |   |

|   |  |   |  |
|---|--|---|--|
| Total number of hours experience as an EFL/ESOL Teacher | Less than 1800<br>(less than 3 years)<br><input type="radio"/> | Between 1800 – 3000<br>(between 3 and 5 years)<br><input type="radio"/> | More than 3000<br>(more than 5 years)<br><input type="radio"/> |
|---|--|---|--|

### 5: Young Learners Experience (if applicable)

|  |
|--|
| <b>Please give details of the age groups and experience gained</b> |
|  |

**6. FOR CENTER USE ONLY** (Please put an X in the appropriate box(es) to indicate which level(s) the prospective SE is eligible for)

|                        |  |  |  |                            |  |
|------------------------|--|--|--|----------------------------|--|
| A2 Key/Key for Schools |  | B1 Preliminary/<br>Preliminary for Schools |  | B2 First/First for Schools |  |
| C1 Advanced            |  |  |  |                            |  |
| Pre A1 Starters        |  | A1 Movers                                  |  | A2 Flyers                  |  |



# DECLARATION FORM

You will be asked to sign a declaration stating the following:

I give permission for Cambridge English to make recordings of Speaking tests and quality assurance events in which I participate as part of my role as a Speaking Examiner, and to make copies or transcriptions of such recordings. I understand that the recordings will be used only for the following purposes:

- a) analysis for research and validation internally within Cambridge English, including second marking and examiner monitoring for quality control;
- b) externally by approved researchers, subject to strict conditions consistent with accepted research practice in the field, who may make manual or electronic copies;
- c) parts of recordings or parts of transcriptions may be used for TL and SE induction, training, certification and monitoring events and activities and for presentation at professional development events such as training seminars and conferences. I hereby waive any right to be identified as the author of the work.

I agree that if approved as a Cambridge English Speaking Examiner, I will comply with all requirements for examining conduct, confidentiality and co-operation as set out in the relevant *Instructions to Speaking Examiners* and *Guidance and Code of Practice for Speaking Examiners and Team Leaders*.

I am able to access the internet routinely via broadband connection.

## **FOR A1 STARTERS, A1 MOVERS OR A2 FLYERS SPEAKING TESTS ONLY**

I hereby certify that in undertaking the position of Speaking Examiner for the Pre A1 Starters, A1 Movers and A2 Flyers, I understand that I shall be responsible for examining children between the ages of 7 and 12 on a one-to-one basis. I declare that I am a fit person to undertake such work and that I comply with current local legislation relating to working with children in this context.

**Date:**

**Full Name and Signature:**

**Note to the centre:** Please submit the online nomination form in order to nominate a new SE – this pdf form is for your use to send to applicant SEs if required and will not be processed as a nomination.