

Please enter changes

## Code number

Name of examination centre

Name of examination centre (new)

## Addresses

Billing address

Billing address (new)

E-mail address for invoices

Delivery address = Examination centre

Delivery address = Examination centre (new)

Delivery address, if according to the contract  
different from examination centre

Delivery address, if according to the contract  
different from examination centre (new)

Address of the additional examination centre  
facilities (not delivery and billing address)

Change of address – reason and timeframe  
(please tick or fill in):

Relocation

Construction work

Other

Permanent

Temporary - until dd.mm.yyyy

Change valid from date

## Contact details of the examination centre

Phone number (new)

Fax number (new)

E-mail address (new)

Website (new)

## Exam Centre Coordinator (new):

First Name

Last Name

Title

**Exam Centre Coordinator (new):**

Phone number

E-mail address

Replaces the following Exam Centre Coordinator:

**Contact person (new)**

First name

Last name

Title

Phone number

E-mail address

Postion

Replaces the following contact person

**New examination centre facilities**

Labeled photos of

Examination room / rooms

Preparation room

Waiting room

Floor plan

Seating plan for written examinations

Copy of the rental contract

**Attachments for the new delivery address**

Photo of the lockable cabinet for examination documents

Photo of the lockable office where this cabinet is located

**Attachments for additional examination rooms**

Labeled photos of

Examination room / examination rooms (if available)

Preparation room (if available)

Waiting room (if available)

Floor plan

Seating plan for written examinations

Copy of the rental contract

Date \_\_\_\_\_, Place \_\_\_\_\_