

**TOEFL®** Fee Reduction Service Voucher Request Form 2020-21

(for use in the United States only-not valid for test dates after June 30, 2021)

## **Counselor and School Information**

School Name:			
Street Address:			
City:		State:	Zip Code:
Phone:	Fax:	Email:	

*TOEFL*<sup>®</sup> Fee Reduction Service. For each student applying for a fee reduction voucher, I have enclosed a check or postal money order for 50% of the current regular test fee, made payable to ETS-TOEFL iBT, or to ETS-TOEFL for paper administrations. The student's name is written on the front of each payment submitted. I verify that each student is not a foreign exchange student in the United States on a temporary basis. I have also enclosed a Student Profile form for each student who will register by mail or by phone.

Signature of Counse	elor	Date	
List of Students Re	equesting Fee Reduction Vouche	ers (please print clearly)	
Last Name	First Name	Date of Birth	ETS ID#

If you have additional students, please print or type their names on a separate sheet of paper. Be sure to include their dates of birth. A complete list of names, a check or postal money order for each student, and a completed Student Profile for each student who will register by mail or by phone must accompany this voucher request form.

Mail to: TOEFL Fee Reduction Service Educational Testing Service – MS 13-Q PO Box 6156 Princeton, NJ 08541-6156

## 2020-21 *TOEFL*® FEE VOUCHER REQUEST FORM — STUDENT PROFILE

Complete this form only if you will register by mail or by phone.

If you will register online, go to the online registration system to create a profile.

All required fields must be completed. Required fields are noted with an asterisk (\*).

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