

**Alliance Française de Colombo**

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AF de Colombo	
AF de Jaffna	
AF de Matara	
Annexe de Galle	
External	

**DELFL / DALFL**

SESSION: 2025-05 TP

**\*ALL YOUR INFORMATION SHOULD BE EXACTLY THE SAME AS IT IS IN YOUR NIC/PASSPORT AS PER THE FRENCH GOVERNMENT REGULATIONS.**

**ONCE REGISTERED. NO REFUNDS OR CANCELLATIONS WILL BE POSSIBLE**

Did you sit for a DELFL-DALFL Exam before? Yes, I did.  No, I didn't

If yes, candidate no: (*Not the student No. given by Alliances*) 094001-.....

Title: Mr.  Ms.

Surname of the candidate :.....

Other names :.....

NIC or Passport number: (*will require to provide on the date of the examination*) :.....

Date of birth (DD/MM/YYYY) :.....

Age :.....

City of birth :.....

Country of birth :.....

Mother tongue (*native language*) :.....

Nationality :.....

Address :.....

Postal code :..... City:.....

Phone :.....

E-mail :.....

Your School/University/Insitution:.....

Left-handed:  Right-handed:

DELFL / DALFL Levels:

Examination	Per Diploma - Students of Alliances Françaises. (for AF students registered during the past 12 months)	Per Diploma - External Student
A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/>	Rs. 8,250/- <input type="checkbox"/>	Rs. 16,500/- <input type="checkbox"/>
B2 <input type="checkbox"/>	Rs. 9,900/- <input type="checkbox"/>	Rs. 19,800/- <input type="checkbox"/>
C1 <input type="checkbox"/> C2 <input type="checkbox"/>	Rs. 10,450/- <input type="checkbox"/>	Rs. 20,900/- <input type="checkbox"/>

**I hereby declare that the information given above is true and accurate to the best of my knowledge.**

Date.....

Signature.....

*For office use.*

Date.....

Receipt No.....