

PRECIS INTERACTIVE LANGUAGE LEARNING

SIGN UP FORM

Surname:	Name:
Age:	Nationality:
Company:	Profession:
Company address:	
N° Work:	N° home:
Email:	Fax:

LANGUAGE LEVEL	
Native language: What language do you want to study?	Other languages spoken:
Have you ever studied abroad? If yes, which? What is your level? Look at assessment grid to help	Yes <input type="checkbox"/> No <input type="checkbox"/>

TRAINING	
What type of course are you signing up for?	
Business <input type="checkbox"/>	Written correspondence <input type="checkbox"/>
General <input type="checkbox"/>	Telephone <input type="checkbox"/>
Group class (Mondorf) <input type="checkbox"/>	Other (please specify) <input type="checkbox"/>
What linguistic competencies do you want to improve?	
Oral <input type="checkbox"/> Reading <input type="checkbox"/> Listening <input type="checkbox"/> Written <input type="checkbox"/> Grammar <input type="checkbox"/>	
What are your objectives?	
Do you have any specific needs?	
How many people will take the course? Names if appropriate	

When do you want to start?	
When do you want to finish?	
Where do you want to study?	
In your company <input type="checkbox"/>	No preference <input type="checkbox"/>
Précis premises Mondorf <input type="checkbox"/>	

How do you want to be contacted?	
Telephone <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/> Fax <input type="checkbox"/>	
Are you interested studying abroad?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you want to receive documentation on studying abroad?	
Yes <input type="checkbox"/> No <input type="checkbox"/>	

Signature

Date