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| **InterEducation Logo-01 (2)**  Telephone: 0044 1451 860582 Email: English@InterEducation.eu Website: www.InterEducation.eu |

**REGISTRATION FORM 2025**

**Please complete Box A or Box B (not both)**

|  |  |  |  |
| --- | --- | --- | --- |
| **BOX A** | | **BOX B** | |
| I will definitely attend this course |  | I would like to attend this course but will only do so if I am awarded a grant |  |
| I have already been awarded an Erasmus+ Grant |  | My school is applying for Erasmus+ funding |  |
| I intend to pay my own fees |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **COURSE INFORMATION** | | | |
| **COURSE TITLE:** |  | | |
| **COURSE LOCATION:** |  | | |
| **COURSE DATES:** |  | | |
| **PARTICIPANT INFORMATION** | | | |
| **NAME OF TEACHER:** | | | |
| **ADDRESS:**  **COUNTRY: NATIONALITY:** | | | |
| **EMAIL:** | | | |
| **TELEPHONE:** | | | |
| **Male/Female:** | | **Date of Birth:** | |
| **Approximate Level of English** | | **A1  A2  B1  B1+  B2  C1  C2** | |
| **Subjects you teach:** | |  | |
| **Age of your pupils:** | |  | |
| **PARTICIPANT’S SCHOOL / COLLEGE INFORMATION** | | | |
| **NAME OF YOUR SCHOOL / COLLEGE:** | | | |
| **ADDRESS:** | | | |
| **EMAIL:** | | | |
| **TELEPHONE:** | | | |
| **ACCOMMODATION: Which type of accommodation would you prefer?** | | | |
| Full-board host family accommodation (single room) | | |  |
| Self-catering in a central university (single ensuite room)  *(June, July and August courses only)* | | |  |
| I prefer to find my own accommodation | | |  |
|  | | | |
| **TODAY’S DATE:** | | | |