

APPLICATION FORM : UMBRIA

STAFF : 13 JULY - 20 JULY 2025

VET International Consortium for Tourism and Environment - ACCREDITAMENTO 2021/2027 – annualità 2024 2025 - cod. 2024-1-IT01-KA121-VET-000206604

FIRST NAME: COUNTRY: ITALY DATE OF BIRTH HOME ADDRESS (<u>ful</u> l postal address	SURNAME:		
DATE OF BIRTH			Sex: M 🗌 F
	NATIONALITY:	MOTHER TONGUE:	
HOME ADDRESS (full postal address	REGION: UMBRIA	PASSPORT OR IDENTITY CARD NUMBER:	
	s including street, town , post code e	etc):	
Town & Postcode:			
Telephone:	Mobile:	E-mail:	
PRESENT POSITION IN YOUR COMP	ANY/ORGANIZATION:		
NAME & ADDRESS OF COMPANY O	R ORGANISATION:		
Telephone:		Email:	
WHAT TYPE OF ORGANISATION IS 1	THIS?		
ARE YOU A TEACHER / SCHOOL MA	NAGER / SPECIAL SUPPORT TEACI	HER / BODY REPRESENTATIVE ?	
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 I Elementary A2 I HAVE YOU ATTENDED A TEACHERS	: Pre-Intermediate B1 🗌 Intermedia S' COURSE IN ENGLISH LANGUAGE	ate B1+ Upper Intermediate B2 Advanced C1 Adva BEFORE? YES NO	
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1	: Pre-Intermediate B1 Intermedia S' COURSE IN ENGLISH LANGUAGE D WHEN	ate B1+ Upper Intermediate B2 Advanced C1 Adva BEFORE? YES NO	anced C2 🗌
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1	: Pre-Intermediate B1 Intermedia S' COURSE IN ENGLISH LANGUAGE D WHEN	ate B1+ Upper Intermediate B2 Advanced C1 Adva BEFORE? YES NO	
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 Elementary A2 HAVE YOU ATTENDED A TEACHERS IF YES, PLEASE STATE WHERE AND PERSONAL REMARKS (eg. Health, D	: Pre-Intermediate B1 Intermedia S' COURSE IN ENGLISH LANGUAGE D WHEN	ate B1+ Upper Intermediate B2 Advanced C1 Adva BEFORE? YES NO	anced C2 🗌
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 Elementary A2 HAVE YOU ATTENDED A TEACHERS IF YES, PLEASE STATE WHERE AND PERSONAL REMARKS (eg. Health, D FULL BOARD ACCOMMODATION: HOTEL/ APARTMENTS ACCOMM	: Pre-Intermediate B1 Intermedia S' COURSE IN ENGLISH LANGUAGE D WHEN Diet, etc): MODATION (Bedrooms are always	ate B1+ Upper Intermediate B2 Advanced C1 Adva BEFORE? YES NO D DO YOU SMOKE?	anced C2 YES/NO
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 Elementary A2 HAVE YOU ATTENDED A TEACHERS IF YES, PLEASE STATE WHERE AND PERSONAL REMARKS (eg. Health, D FULL BOARD ACCOMMODATION: HOTEL/ APARTMENTS ACCOMM I WOULD LIKE TO BE THE ONLY	: Pre-Intermediate B1 Intermedia 5' COURSE IN ENGLISH LANGUAGE D WHEN Diet, etc): MODATION (Bedrooms are always 7 PERSON IN THE ROOM/APARTMEN	ate B1+ Upper Intermediate B2 Advanced C1 Advanced C1 BEFORE? YES NO DO YOU SMOKE? S single unless you ask to share a bedroom with a named participar NT	anced C2 YES/NO
WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 Elementary A2 HAVE YOU ATTENDED A TEACHERS IF YES, PLEASE STATE WHERE AND PERSONAL REMARKS (eg. Health, D FULL BOARD ACCOMMODATION: HOTEL/ APARTMENTS ACCOMM I WOULD LIKE TO BE THE ONLY I DO NOT MIND IF THERE IS AND	: Pre-Intermediate B1 Intermedia 5' COURSE IN ENGLISH LANGUAGE D WHEN Diet, etc): MODATION (Bedrooms are always Y PERSON IN THE ROOM/APARTMEN DTHER GUEST OF MY MOTHER TON	ate B1+ Upper Intermediate B2 Advanced C1 Advanced C1 BEFORE? YES NO DO YOU SMOKE?	anced C2 YES/NO nt)
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WHAT IS YOUR LEVEL OF ENGLISH: Beginner A1 Elementary A2 HAVE YOU ATTENDED A TEACHERS IF YES, PLEASE STATE WHERE AND PERSONAL REMARKS (eg. Health, D FULL BOARD ACCOMMODATION: HOTEL/ APARTMENTS ACCOMM I WOULD LIKE TO BE THE ONLY I DO NOT MIND IF THERE IS AND I WOULD PREFER TO SHARE A I WOULD PREFER TO HAVE A S If you wish to share with a particula Please specify if the companion is NB: Whilst every effort will be ma	: Pre-Intermediate B1 Intermedia S' COURSE IN ENGLISH LANGUAGE Intermedia S' COURSE IN ENGLISH LANGUAGE Intermedia O WHEN	ate B1+ Upper Intermediate B2 Advanced C1 Advanced C1 BEFORE? YES NO DO YOU SMOKE? as single unless you ask to share a bedroom with a named participation of the state of the sta	anced C2 YES/NO

Partecipant's Signature;.....