



TEACHERS TRAINING PROGRAMS

2019 REGISTRATION FORM

TEACHER INFORMATION

Name	<input type="text"/>	Surname	<input type="text"/>	<input type="checkbox"/> Female	<input type="checkbox"/> Male
Street	<input type="text"/>				
City	<input type="text"/>	Postal Code	<input type="text"/>	Country	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>	E-mail	<input type="text"/>
Date of Birth	D <input type="text"/> M <input type="text"/> 19 <input type="text"/>	Nationality	<input type="text"/>	Passport nº	<input type="text"/>
Teacher of Spanish at (School or University)	<input type="text"/>				

COURSE INFORMATION

Knowledge of Spanish: ☐ Beginner ☐ Elementary ☐ Intermediate ☐ Advanced Intermediate ☐ Advanced

I would like to register in the teacher training course

In Salamanca: from D M 20 to D M 20 Weeks:

Notes

ACCOMMODATION INFORMATION

Homestay:	<input type="checkbox"/> Double room	<input type="checkbox"/> Half board	Private apartment:	<input type="checkbox"/> Single room	<input type="checkbox"/> Double room*
	<input type="checkbox"/> Single room	<input type="checkbox"/> Full board	Hotel**:	<input type="checkbox"/> Single room	<input type="checkbox"/> Double room*
Residence hall:	<input type="checkbox"/> Double room*	<input type="checkbox"/> Half board	Hotel****:	<input type="checkbox"/> Single room	<input type="checkbox"/> Double room*
	<input type="checkbox"/> Single room	<input type="checkbox"/> Full board			

* Only available if you book together with the other roommate

In Salamanca: from D M 20 to D M 20 Days:

Do you have any special requirements regarding your accommodation?

CONTACT INFORMATION IN CASE OF EMERGENCY DURING YOUR STAY

Name	<input type="text"/>	Surname	<input type="text"/>	<input type="checkbox"/> Female	<input type="checkbox"/> Male
What relationship do you have with this person?	<input type="text"/>				
Street	<input type="text"/>				
City	<input type="text"/>	Postal Code	<input type="text"/>	Country	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>	E-mail	<input type="text"/>
How did you hear about Mester?	<input type="text"/>				

PICK UP SERVICE FROM/TO MADRID AIRPORT

ARRIVAL DETAILS

Date D M 20 Hour Airline Flight Nr.

DEPARTURE DETAILS

Date D M 20 Hour Airline Flight Nr.

DECLARA:

Estar actualmente trabajando como profesor de español en la institución extranjera indicada más arriba

FIRMA