

PERSONAL DETAILS

First Name: _____

Surname: _____

Gender: _____

Nationality: _____

Passport Number: _____

Date of Birth: _____

Contact Tel: _____

Email Address: _____

Home Address: _____

Occupation/ Job: _____

Please give details of any special needs, learning difficulties or medical conditions the school should be aware of:

How did you hear of LSI/IH Portsmouth?

- Representative British Council
 Ex-Students Friends
 International House Social Media: _____

COURSE DETAILS

Please choose the programme you require:

- 30+ CORE (15 hours - mornings only)**

Afternoon options:

- Intensive**
 Business Communication
 Individual 5 hours
 Individual 10 hours
 Culture

Dates of Course: _____

Number of weeks: _____

Would you like to join the trainer-accompanied lunch programme?

- Yes No

I have read and understood the terms and conditions. Signed: _____ Date: _____

Contact in emergency: _____ Relationship: _____ Telephone: _____

LEVEL OF ENGLISH:

	Very good	Good	Inter-mediate	Weak	Very weak
Speaking					
Listening					
Reading					
Writing					

Where did you learn your English?

At School - if so, how many years? _____

At evening classes or language school - how many hours in total?

Other _____

Do you have any English language certificates or qualifications?

ACCOMMODATION

1. Would you like us to arrange homestay or self-catering accommodation for you?

Executive Homestay Self-catering No, thanks

2. Do you smoke? Yes No

3. If you have chosen homestay, do you have any special preferences, e.g. size of family, age, children, household pets, hobbies/interests?

4. Any allergies? _____

5. Any special dietary needs? (supplement may apply)

6. Any health problems or disabilities?

ARRIVAL DETAILS

Date & time: _____

Flight Number & Airport: _____

Do you require an airport taxi transfer?

No Yes, one way Yes, return