

# APPLICATION FORM 2008



Estudio Sempere

Please print in capital letters and fill in each category completely in black ink.

## 1. PERSONAL DATA:

LAST NAME \_\_\_\_\_  
 FIRST NAME \_\_\_\_\_ MIDDLE NAME \_\_\_\_\_  
 SEX  M  F DATE OF BIRTH \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
DAY MONTH (JAN, FEB, ETC.) YEAR FORMER ESTUDIO  YES  NO  
SAMPERE STUDENT  
 NATIONALITY \_\_\_\_\_ OCCUPATION \_\_\_\_\_  
 PHONE NUMBER (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 E-MAIL \_\_\_\_\_

I WANT ALL MATERIAL AND INFORMATION TO BE MAILED TO THIS ADDRESS:

COMPLETE ADDRESS: # STREET APT. \_\_\_\_\_  
 CITY, STATE AND ZIP CODE \_\_\_\_\_  
 \_\_\_\_\_  
 COUNTRY \_\_\_\_\_

UNIVERSITY/SCHOOL /COMPANY .....

I HEARD ABOUT ESTUDIO SAMPERE THROUGH .....

CURRENT LEVEL OF SPANISH:

NONE  ELEMENTARY  INTERMEDIATE  ADVANCED  HIGHER YEARS OF STUDY .....

(ALL STUDENTS WILL TAKE A PLACEMENT TEST THE FIRST DAY OF CLASS TO DETERMINE EXACT LEVEL OF INSTRUCTION)

## 2. COURSE DETAILS:

I WOULD LIKE TO ENROLL IN A \_\_\_\_\_ WEEK COURSE STARTING ON \_\_\_\_\_ THROUGH \_\_\_\_\_ 2008  
(number of weeks) MONDAY MONTH FRIDAY MONTH (JAN, FEB, ETC.) (JAN, FEB, ETC.)

Indicate with an

IN MADRID ■  IN SALAMANCA ●  IN ALICANTE ◆  IN EL PUERTO ▲  IN ECUADOR ★

INTENSIVE COURSE ■●◆▲★  COMBINED COURSE ■●◆▲  ESPAÑOL PARA SIEMPRE ■●◆▲

INTENSIVE PLUS ■●◆▲★  ART & CRAFTS (CUENCA) ★

JUNIOR COURSE ●  TOTAL IMMERSION "ONE-TO-ONE" ..... LESSONS/WEEK ■●◆▲★

SPRING SEMESTER ■●◆▲  FALL SEMESTER ■●◆▲  SUMMER SESSION ■●◆▲

STARTING MONDAYS FOR COMBINED COURSE: MADRID SALAMANCA ALICANTE PUERTO  
 DAY / MONTH DAY / MONTH DAY / MONTH DAY / MONTH  
(JAN, FEB, ETC.) (JAN, FEB, ETC.) (JAN, FEB, ETC.) (JAN, FEB, ETC.)

Indicate with an

## 3. ACCOMMODATION:

NO ACCOMMODATION  STUDENT ROOM ■●◆▲  
 FAMILY ACCOMMODATION ■●◆▲★  SINGLE ROOM ■●◆▲★  HALF BOARD ■●◆▲ (2 meals per day)  
 DOUBLE ROOM ■●◆▲  FULL BOARD ■★ (3 meals per day)

## 4. OTHER: Allergies. Special Diets. Non smoker. Comments:

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 Passport N° .....

## 5. UNIVERSITY CREDITS: I wish to have my transcript sent to my University for Credit: ESTUDIO SAMPERE TRANSCRIPT

Name and e-mail address of contact person at home University: .....

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Student ID Number at home University: .....

Title and number of course(s) chosen at Estudio Sempere: .....

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Complete physical address including zip code of home University: .....

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DETACH PAGE OR COPY AND MAIL/FAX. PLEASE READ THE DESCRIPTION OF THE COURSE AND THE CONDITIONS OF ENROLLMENT CAREFULLY.

FAX TO: (707) 431-1685  
 SEND TO: DOROTHY RUDY, P.O. BOX 1434, HEALDSBURG, CALIFORNIA 95448



