

# Registration for the Spanish Intensive Course

Name \_\_\_\_\_

Surname \_\_\_\_\_

Home Institution (High School or University)  
\_\_\_\_\_

Arrival date to Argentina (dd/mm/yyyy) \_\_\_\_\_

Departure date from Argentina (dd/mm/yyyy) \_\_\_\_\_

Current address: \_\_\_\_\_

Current telephone number: \_\_\_\_\_

Current e-mail address: \_\_\_\_\_

Permanent address: \_\_\_\_\_

Permanent telephone number: \_\_\_\_\_

Permanent e-mail address: \_\_\_\_\_

Gender: \_\_\_\_\_

Date of birth (dd/mm/yyyy): \_\_\_\_\_

City and country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Passport Number: \_\_\_\_\_

How long have you studied Spanish? \_\_\_\_\_

Rate your fluency in Spanish:

	Verbal	Writing	Reading
Very good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fecha (dd/mm/aaaa) \_\_\_\_\_ Firma y aclaración \_\_\_\_\_  
Date (dd/mm/yyyy) \_\_\_\_\_ Name and Signature \_\_\_\_\_