

LIDEN & DENZ ENROLMENT FORM

PERSONAL DETAILS					
Family Name _____		First Name _____		Sex _____	
Address _____		Zip/City _____		Country _____	
Tel.(day) _____		Tel.(evening) _____		Email (Fax if no email) _____	
Who to contact in case of emergency during your stay in Russia _____					
COURSE DETAILS (check pricelist for exact dates)					
Course type	Place of study	Number of lessons/week		From (DD/MM/YY)	Length (weeks)
<input type="checkbox"/> Group Standard	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	20		___/___/___ ___/___/___	_____
<input type="checkbox"/> Group Intensive	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	25		___/___/___ ___/___/___	_____
<input type="checkbox"/> One-to-One	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Total Immersion Course	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	20		___/___/___ ___/___/___	_____
<input type="checkbox"/> Academic Year Course	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	<input type="checkbox"/> 20 <input type="checkbox"/> 20	<input type="checkbox"/> 25 <input type="checkbox"/> 25	___/___/___ ___/___/___	_____
<input type="checkbox"/> Additional modules (1 module = 5 lessons)	<input type="checkbox"/> Business Russian <input type="checkbox"/> Russian Literature <input type="checkbox"/> Russian Music <input type="checkbox"/> One-to-one (incl TRKI)	_____ modules		___/___/___	_____
Mother tongue _____ Other languages _____					
How do you assess your level of Russian (please refer to our level descriptions in our main brochure)?					
<input type="checkbox"/> A1-Beginner <input type="checkbox"/> A2-Elementary <input type="checkbox"/> B1-Intermediate <input type="checkbox"/> B2-Upper-intermediate <input type="checkbox"/> C1-Advanced					
Previous Russian language courses – Please indicate year of study, place of study, course length and course intensity (lessons/week):					

How did you hear about Liden & Denz? _____					
ACCOMMODATION DETAILS					
Accommodation type	Place of study	Requirements/Comments		From (DD/MM/YY)	Length (weeks)
<input type="checkbox"/> Host Family	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Shared flat	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Hotel	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Private apartment	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Accommodation organised independently	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	_____		___/___/___ ___/___/___	_____
<input type="checkbox"/> Transfer services required	<input type="checkbox"/> St. Petersburg <input type="checkbox"/> Moscow	Details: _____			_____
VISA RELATED DETAILS (all participants MUST have a valid Russian visa)					
Please send me a visa support letter covering the period from ___/___/___ to ___/___/___ (DD/MM/YY)					
Passport No. _____ Passport issue and expiry dates _____					
Nationality _____ Place of birth _____ Date of birth ___/___/___					
Profession, employer and work/study address _____					