



**COURSE APPLICATION FORM  
IN ALLIANCE FRANÇAISE IN KATOWICE**

**Name:** .....

**Surname:** .....

**Date of birth:** ..... **Place of birth:** .....

**Address:** .....

**Nationality:** .....

**Phone number:** .....

**E-mail:** .....

Pupil    Student    Employee    Company proprietor    Other.....

**Company / School name:** .....

**Course type and group:** .....

**Course level (A1, A1+, A2, A2+, B1, B1+, B2, C1, C2) :** .....

**Dates :** .....

**Continuation of last year course:**                       YES                       NO

**How long do you study French:** .....

**Are you interested in a French course taught in English (instead of Polish)?**

YES       NO

**Remarks:**.....  
.....

I declare that I have read and accepted the LANGUAGE COURSE REGULATIONS and the privacy policy of the Alliance Française Association in Katowice.

I consent to the processing of my personal data included in the application documents, for the purpose and to the extent to carry out the recruitment and implementation of the educational, examination or translation service by the Alliance Française Katowice Association with its registered office in Katowice 40-013, ul. Staromiejska 12/3.

I consent to the processing of my personal data for the purpose of sending promotional and marketing information via electronic means of telecommunications by the Alliance Française Katowice Association with its registered office in Katowice 40-013, street Staromiejska 12/3.

**Date** .....

**Signature** .....