



PHOTO

STUDENT INFORMATION

Surname			
Name			
Date of birth	Age	Nationality	
Complete address			
Mobile number			
Email			
ID o Passport number	Date of Issue	Date of expiry	
Level of English			Certificates
Occupation			
Allergies (food, animals, medication, intolerances, etc.)			
Host family preferences	<input type="checkbox"/> Without kids <input type="checkbox"/> Without pets <input type="checkbox"/> Non-smokers	<input type="checkbox"/> I am smooker <input type="checkbox"/> I am a non-smooker <input type="checkbox"/> I am vegetarian	
Comments			

COURSE INFORMATION

Course name			
Accommodation	<input type="checkbox"/> Shared bathroom	<input type="checkbox"/> Individual bathroom	
Dates	ARRIVAL DATE: DEPARTURE DATE:		

DOCUMENTATION TO BE SENT TO THE ORGANISATION:

- Completed application form.
- Photocopy of a valid ID card and the European Health Card.
- General Conditions signed by the student.

A proof of a single payment to:

EGA INTERNATIONAL LANGUAGE SCHOOL LIMITED

AIB Killarney, Kerry, Ireland, 25 Main St. Killarney, Co. Kerry, Ireland

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