

Scuola Leonardo da Vinci® - Florence - Milan - Rome - Siena

Application for CSN students <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Mr.				
First name:		Family name:		
Date and place of birth:			Nationality:	
Profession/Studies:		Passport number:		
Home address:				
City:		Postal code:		Country:
Phone: /	Cellular: /		Fax: /	
Email:				
In case of emergency please inform:				
I wish to enroll at the Scuola Leonardo da Vinci in: <input type="checkbox"/> Florence <input type="checkbox"/> Milan <input type="checkbox"/> Rome <input type="checkbox"/> Siena				
I found out about the Scuola Leonardo da Vinci through:				
I wish to enroll in the following courses:				
Course No.	Course Title	Starting date		Total weeks
<input type="text"/>	<i>Language course for «CSN» students</i>	<input type="text"/> day	<input type="text"/> month	<input type="text"/> year
<input type="text"/>	_____	<input type="text"/> day	<input type="text"/> month	<input type="text"/> year
<input type="text"/>	_____	<input type="text"/> day	<input type="text"/> month	<input type="text"/> year
I wish to enroll in the following additional courses:				
Special requests/observations:				
My knowledge of Italian:				
Have you already studied Italian? <input type="checkbox"/> no <input type="checkbox"/> yes:				
University/school: _____				
Address: _____				
Zip code: _____ City: _____				
Name of Italian teacher: _____				
Self evaluation (A1/A2 ... = Ability levels according to the assessment scale of the European Language Portfolio):				
<input type="checkbox"/> absolute beginner	<input type="checkbox"/> beginner with previous study of Italian	<input type="checkbox"/> basic (A1)	<input type="checkbox"/> low intermediate (A2)	
<input type="checkbox"/> high intermediate (B1)	<input type="checkbox"/> advanced (B2)	<input type="checkbox"/> proficient (C1)	<input type="checkbox"/> diploma level (C2)	
➡ Please fill in also the second page!				

Please do not fill in!

No

Da

Ag

Os

0770

First name: _____	Family name: _____
<p>I wish the school to provide for my accommodation:</p> <p> <input type="checkbox"/> Family, breakfast <input type="checkbox"/> Apartment <input type="checkbox"/> Hotel, breakfast <input type="checkbox"/> double room, together with: _____ <input type="checkbox"/> Family, half board <input type="checkbox"/> Extra Comfort Apartment <input type="checkbox"/> no accommodation requested <input type="checkbox"/> single room </p> <p>Do you smoke? <input type="checkbox"/> no <input type="checkbox"/> yes</p> <p>Do you have any allergies? <input type="checkbox"/> no <input type="checkbox"/> yes: Please give details: _____</p> <p>Do you need a special diet? <input type="checkbox"/> no <input type="checkbox"/> yes: Please give details: _____</p> <p>Do you need transfer? <input type="checkbox"/> no <input type="checkbox"/> yes: Please give details: _____</p> <p style="text-align: right;">Arrival date: _____ Arrival time: _____</p> <p style="text-align: right;">Arrival location: _____</p> <p style="text-align: right;">Flight number: _____ Train number: _____</p>	
Special requests/observations: _____	
<p><i>N.B.: For all accommodations: We need your credit card number as guarantee deposit to make reservations. Lodging costs for family and apartment accommodation have to be paid immediately upon arrival in Italy.</i></p>	
<p>Payment: <i>Note that if you are registering more than 21 days before the beginning of the course, we require the payment of the registration fee of 70 Euro. If you prefer, you can also pay the total course fees at once. If you are registering less than 21 days before the beginning of the course, we require the payment for the total course fees.</i></p> <p>Payment by Bank, Post, Cheque:</p> <p>I have already paid the amount of: Euro _____ by means of:</p> <p style="text-align: center;"> <input type="checkbox"/> International Banker's Cheque <input type="checkbox"/> International Post Money Order <input type="checkbox"/> via Bank (incl. transfer costs) </p>	
<p>Payment by Credit Card:</p> <p>Payment of courses: <input type="checkbox"/> Please charge the amount of: _____ Euro by means of the following Card:</p> <p>Deposit for accommodation: <input type="checkbox"/> Please take a guarantee deposit for accommodation reservations by means of the following Card:</p> <p style="text-align: center;"> <input type="checkbox"/> Eurocard/Master Card/Access <input type="checkbox"/> American Express <input type="checkbox"/> Visa/BankAmericard <input type="checkbox"/> Diner's Club <input type="checkbox"/> JCB </p> <p style="text-align: center;"> </p> <p style="text-align: center;"> <small>Credit Card number Card Security Code valid through</small> </p> <p>Card holder's name (mandatory): _____</p> <p>Card holder's signature: _____</p>	
<p>I have read the "General Conditions of Participation" and hereby declare my acceptance:</p> <p>Place and date: _____</p> <p>Signature (or by legal guardian): _____</p>	
Enclosed: Banker's Cheque or receipt of payment	

Please send the application form directly to the school centre of your choice. Thank you!

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