

ESOL Training Enrolment Form
Please ask for help with this form if you want.



For Term beginning:	Level:
Your Name:	
Your Address:	
Postcode:	
Telephone:	Mobile:
Email address:	
Female *	Male *
Year of Birth: 19	
Do you have any particular needs? (e.g. disability, dietary requirements, access):	
Have you been to English classes before?	
If yes, when / date	where
What is your native language?	
What country are you from?	
How long have you been in the UK?	
Do you have a job? Yes / No	
If yes, what is your job?	
Or are you a Student or Retired and/ or Looking for Work?	
Is there anything else that is relevant to say?	
Note: We will need to see your passport to ascertain your right to the subsidised course cost.	
How did you hear about this course?	
Why did you choose this course?	
By the end of the course what do you hope to be able to do?	
Payment enclosed: £	
Payment is required with your enrolment for the first term and is non-refundable Exam enrolment is also payable at the start of term; later payment will require an additional fee. Cheques are payable to Community Action Fareham	

Data Protection: your personal information will be used by Community Action Fareham only for the purposes of ESOL course administration. Information may be passed to the funding and accreditation authorities only.

Return to: ESOL Coordinator, Community Action Fareham, 163 West Street, Fareham, PO16 0EF.
E mail esol@farehamaction.org.uk or call 01329 223145 to reserve a place or for more details.

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