



Application Form

40 Foregate St, Worcester WR1 1EE, UK
Tel +44 1905 619877 Fax +44 1905 613388
info@kingsway-english.com www.kingsway-english.com

Personal

First Name Title Age Sex

Family Name Nationality

Address Home Language

Occupation

Mobile Phone Email Address

Current English Level

Please tell us your current English level? How long have you studied English?

Reading Writing Speaking Listening

What do you need English for?

What are your objectives?

Course Details

Course Course 2 Course 3

Start date Start date Start date

Finish date Finish date Finish date

Accommodation

Homestay Regular Homestay Premium Homestay Executive Self Catering Hotel None Required

Do You Smoke? Yes No Would you be happy to stay with a non-smoking family? Yes No

Is it a problem if your host family has pets? Yes No

Is it a problem if your host family has children? Yes No

Do you have any special dietary needs/illness/disabilities?

For homestay accommodation only:

Are you married? Are you single?

Do you have any children?

If yes m/f?

Ages?

Travel

	Arrival in UK	Departure from UK
Method of travel	<input type="text"/>	<input type="text"/>
Date of travel	<input type="text"/>	<input type="text"/>
Place of arrival/departure	<input type="text"/>	<input type="text"/>
Time	<input type="text"/>	<input type="text"/>
Flight number (if applicable)	<input type="text"/>	<input type="text"/>
Do you require transfer by car?	<input type="radio"/> Yes	<input type="radio"/> Yes

I apply for the course and accommodation indicated. I have read the terms and conditions and agree to all the points

Signed Agree