**STAFF WEEK REGISTRATION FORM**

***Cinema in Paris***

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| First name | |  | | | | | | | |
| Last name | |  | | | | | | | |
| Nationality | |  | | | Passport Number or National ID | | |  | |
| Date of birth | |  | | | | | | | |
| Home address | |  | | | | | | | |
|  | | | | | | | | | |
| City | |  | | | | | Country |  | |
| Mobil Phone number | |  | | | | | | | |
| E-Mail | |  | | | | | | | |
| Home institution | | | |  | | | | | |
| Department work area | | | |  | | | | | |
| Position | | | |  | | | | | |
| Job description. What are your main responsibilities at your home institution? | | | | | | | | | |
|  | | | | | | | | | |
| Special field of interest | | | | | | | | | |
|  | | | | | | | | | |
| Level of French Language Competence | | | | | | | | | |
| A2 | | | B1 | | | B2 | | | C1 |
| Other spoken languages | | | | | | | | | |
|  | | | | | | | | | |
| Erasmus code |  | | | | | | | | |

**Send this registration form to :** [contact@frenchcultureinstitute.com](mailto:contact@frenchcultureinstitute.com)

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