**Staff Training Week**

**Foreign Languages with the Jagiellonian Language Centre**

**8-12 July 2019**

**Jagiellonian Language Centre**

**Jagiellonian University, Kraków, Poland**

**Registration Form for Language Course Participants**

|  |  |
| --- | --- |
| First name |  |
| Surname |  |
| Title | Mr/Ms |
| Home institution |  |
| Department/Unit |  |
| Job title |  |
| Workplace address |  |
| Country |  |
| Erasmus code of the institution (if applicable) |  |
| Your email address |  |
| Your passport number |  |
| Your telephone number |  |
| Telephone number of a contact person in case of an emergency during the Staff Week |  |
| The title of the course you want to join |  |
| My name and affiliation may appear on the badge | * Yes
* No
 |
| I want to receive a Certificate of Attendance | * Yes
* No
 |

**Please return the form by 30 April 2019 at:** **alicja.waligora-zblewska@uj.edu.pl**

Please note that the name and affiliation will be printed on your badge.

Please note that after you have submitted the registration form, you will receive information concerning the payment.