

ILISA Costa Rica TEFL-program Enrolment Form

Teaching English as a Foreign Language



PLEASE FILL IN THE FORM IN CAPITAL LETTERS

It is important to complete all sections in order to enable us to process your application

Personal data			
First name		Last name	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	Date of birth	(DD/MM/YY)
Country of birth		Citizenship	
Your own language		E-mail	
Address			
City / zip / State			
Country		Telephone (home)	
Cellular		Telephone (work)	
How did you found out about the TEFL-course at ILISA?			
Accommodating data			
Do you want ILISA to organize your accommodation for you?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, which accommodation do you require?		<input type="checkbox"/> Homestay <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Serviced apartment	
Do you smoke?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
In case of homestay, airport pick-up required?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Arrival date	(DD/MM/YY)	Departure date	(DD/MM/YY)
Time of the flight		Airline + flight number	
Any allergies or medical condition?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please give details			
Any special requirements or other information the host family or residence should know about, for example diet information? Please give details:			
Student visa (USA)			
Will you be applying for a student visa?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Academic and professional background							
Your profession and present occupation							
Final qualification at secondary/high school					Year		
University/College attended							
Main subject(s)							
Final qualification at university/tertiary level					Year		
Professional qualifications (other than TEFL)							
Career experience (other than TEFL)							
Foreign languages other than English or your mother tongue (indicate your level)							
Language		Level		Language		Level	
Language		Level		Language		Level	
English language level (if English is not your mother tongue)							
Please write about your level and confidence in English:							
English language exams you have passed (if English is not your mother tongue)							
<input type="checkbox"/> TOEFL				Date		Score/grade	
<input type="checkbox"/> IELTS				Date		Score/grade	
<input type="checkbox"/> Other (please specify):				Date		Score/grade	
English language teaching profile (Please provide all relevant details and dates)							
TEFL qualifications							
TEFL experience							
Present teaching post					Institution/school		
Address							
Telephone					Email		
Fax					How many hours a week do you teach?		
What ages do you teach?					How many students in a typical class?		
What levels do you teach?							
The course books you use:							

English language teaching profile (Please provide all relevant details and dates)			
Specialized teaching/other relevant information:			
What are your reasons for taking the TEFL course?			
Payment			
Payment of deposit	Payment of balance		
<input type="checkbox"/> Credit card (Visa/MasterCard/AMEX) <input type="checkbox"/> Pay by check (www.ilisa.com/paybycheck.htm) <input type="checkbox"/> PayPal (www.ilisa.com/paypal.htm) <input type="checkbox"/> My company / organization will make the arrangements <input type="checkbox"/> Wire transfer (please send wire info)	<input type="checkbox"/> Credit card (Visa/MasterCard/AMEX) <input type="checkbox"/> Pay by check (www.ilisa.com/paybycheck.htm) <input type="checkbox"/> PayPal (www.ilisa.com/paypal.htm) <input type="checkbox"/> My company / organization will make the arrangements <input type="checkbox"/> Wire transfer (please send wire info)		
If you wish to pay by international credit card, please complete the following section:			
I hereby authorize ILISA to charge US\$ to my credit card:			
<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express	
Name of Holder		Card Number	
Expiry date		Signature card holder	
Health and medical insurance			
Please ensure that you have sufficient medical cover during the whole of your stay in Costa Rica.			
It is strongly recommended to take out insurance to provide protection in case of illness, accident or injury, as well as loss of baggage, cancellation, personal liability and other appropriate cover.			
Agreement and signature			
For all students to complete:			
<ol style="list-style-type: none"> I have received and understood the terms and conditions outlines in the relevant ILISA terms and conditions of enrolment documentation, including the cancellation and refund policy. I have read and understood the relevant schedule of costs set out in the current ILISA price lists and hereby affirm that I have sufficient funds to pay for all tuition costs as well as the cost of all food, accommodation and all over personal expenses during the full period of my course at ILISA. I authorize ILISA to take appropriate action in the event of a medical emergency and I understand I am responsible for all medical bills incurred I certify that all the information given by me in this enrolment form is accurate and complete. 			
Signature of applicant _____		Date _____ (DD/MM/YY)	