



# LE&T Pieter Wielick



Dutch Language Education for children

## Application form

	<i>Please fill in with capitals</i>
Name child	
Name parent(s)	
Address	
Telephone home / work	
Telephone mobile	
Email address	
Skype name	
M / F and date of birth	
Nationality	
During the day / evening / weekend	
Native language and other language(s)	
His/her/my background is:	
Reason why you want that your child follows a Dutch language course:	

Place \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_