



**UC SOUTH DENMARK INTERNATIONAL WEEK 2019**  
**29th of April – 3rd of May, 2019 – Campus Esbjerg**  
**ENROLMENT FORM**

**Personal data**

Full name:  
Date of Birth:  
**Home Address:**  
Street:  
Postal Code and City:  
Phone (incl. country and area code):  
E-mail:  
Nationality:

**Home Institution**

Official name of home institution:

Department:

**Address**

Street:  
Postal Code and City:  
Country:

**Name of International Coordinator:**

Phone:  
E-mail:

**Current studies**

Area of study at home institution:

If teacher student (mark with X):

Preschool:          Primary:          Secondary:

Number of complete school years at your home institution:

**Language Competence**

Mother Tongue:

How do you estimate your English language competence concerning:

	Understanding	Speaking	Writing	Reading
Poor				
Fair				
Good				

Please send this information to:

**UC South Denmark**  
**Degnevej 16**  
**DK-6705 Esbjerg**  
**Denmark**

Att.: Anne Jeppesen  
E-mail: acje@ucsyd.dk

Further information:

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