

$\begin{array}{c} Alliance\ Française\ d'Islamabad \\ \text{Children\ French\ Classes\ FORM} \end{array}$

(Fill the form in BLOCK letters)

	Û
1x1	Two
Ph	otos

Full Name	
Date and Place of Birth	
Address	
Parents contact number	Cell#
Parents E-mail	
Person to contact In case of Emergency	Cell#
Parents Profession	Father Mother
Languages Spoken by the child	□ Urdu □ English □ Pashto □ Punjabi □ Sindhi □ Farsi □ Other Language
	□ Arabic □ Spanish □ German □ Dutch □ Russian □ Dari
Nationality	
Nationality	□ Pakistani □ other
	(If non Pakistani please write Nationality)
	□ Nil □ Basic □ Intermediate □ Expert □ Other
Knowledge of French	
Purpose of	☐ Canadian Immigration ☐ Education ☐ Business ☐ Career Motives ☐ Other
Learning French	□ Newspaper □ Website □ NEWS Letter □ Ex-Student □ Other
From where did you Hear about us?	

(Signature of the applicant)

FOR OFFICE USE ONLY Sc: Summer camp for the months of June, July and August

Date of Enrollment	Section	Date	Receipt	Amount	Result	Remarks
January						
March		eg .				
May 2012						
SC: June						
SC :July						
SC August						
September						
November						