



# Application Form

NAME AND SURNAME:		NATIONALITY:	AGE:
CURRENT ADDRESS (street, town, province, post/zip code)		DATE OF BIRTH (dd/mm/yyyy)	PLACE OF BIRTH:
PASSPORT NUMBER:	MOBILE NUMBER:	SKYPE:	EMAIL:
MOTHER TONGUE/S:		HOW LONG HAVE YOU BEEN LIVING IN ENGLISH COUNTRY/STATE:	
UNIVERSITY:		DEGREE:	
GRADE/YEAR:	STUDENT:	EXPECTED GRADUATION DATE: :	
ARE YOU STUDYING SPANISH?		SPANISH LEVEL (EUROPEAN FRAMEBAR)	
THIS INTERNSHIP IS FOR 9 MONTHS		FOR HOW LONG ARE YOU AVAILABLE?	
COULD YOU PROVIDE A UNIVERSITY TRAINING AGREEMENT?		DO YOU HAVE PENDING STUDENT LOANS?	
IS IT YOUR YEAR ABROAD/CO-OP/GAP YEAR?		DOES IT COUNT TO YOUR CREDITS?	
WHERE DID YOU HEAR ABOUT THE PROGRAMME?		DO YOU HAVE TEFL CERTIFICATION OR EQUIVALENT?	
HAVE YOU TRAVELLER ABROAD AGAIN? HAVE YOU EVER WORKED ABROAD BEFORE? IS THIS YOUR FIRST TIME IN SPAIN?			
HOBBIES:		PLEASE DESCRIBE YOUR PERSONALITY (MIN. 5 ADJECTIVES):	
DO YOU SMOKE?	DO YOU DRINK ALCOHOL?	WOULD YOU LIKE TO LIVE WITH A FAMILY THAT HAS PETS?	
WHAT IS YOUR MOTIVATION TO BECOME AN ELA IN SPAIN? WHAT DO YOU EXPECT TO GAIN FROM THE PROGRAMME?			
POINT OUT THREE THINGS THAT CONCERN YOU ABOUT BEING AN ENGLISH LANGUAGE ASSISTANT:			
1.			
2.			
3.			
WHAT ARE YOUR BEST ASSETS TO BECOME AN ENGLISH LANGUAGE ASSISTANT?			
DO YOU HAVE ANY PREVIOUS EXPERIENCE WITH CHILDREN AND TEENAGERS? IF SO, PLEASE EXPLAIN:			
DO YOU HAVE SUFFICIENT FUNDS TO COVER THE COST OF FLIGHTS AND EXTRA MONEY TO COVER PERSONAL EXPENSES IN SPAIN?			
PLEASE INDICATE ANY OTHER PERSONAL INFORMATION OR SPECIAL COMMENTS YOU FEEL MAY BE RELEVANT:			
ARE YOU SUFFERING FROM ANY ILLNESS, ALLERGY OR INTOLERANCE? DO YOU FOLLOW ANY SPECIAL DIET? HAVE YOU EVER HAD A SURGERY? IF SO, SPECIFY:			

Please enclose a handwritten cover letter (no more than 20 lines), your CV, your academic transcript and a picture of you.

Send the documents and this form to: [internship@internshipspain.org](mailto:internship@internshipspain.org)

The data provided to us through this form will be included in a file duly registered in the General Data Protection under the responsibility of COMODIN BARCELONA. To exercise your rights of access, rectification, cancellation and opposition of your personal data, you can turn to our e-mail, [info@internshipspain.org](mailto:info@internshipspain.org) or to our postal address Ptge. de l'ametller, 41, 08980 St. Feliu de Llobregat, Spain, to the file manager.