

Internship Registration Form



Personal Information

First Name : _____
 Last Name : _____
 Sex : Male Female Other
 Date of Birth : _____ (DD/MM/YYYY) Age : _____
 Nationality : _____
 Passport No. : _____ Expiry : _____
 Status : _____ Height/Weight : _____

Address

Contact

Phone No. : _____
 E-mail Address : _____
 Skype ID : _____

Internship Details

Please list your preferred countries and cities.

Country #1 : _____ Country #2 : _____
 City #1 : _____ City #1 : _____
 City #2 : _____ City #2 : _____

Preferred type of internship :

- | | |
|---|----------------------|
| <input type="checkbox"/> Hospitality: Front Office | Preference No: _____ |
| <input type="checkbox"/> Hospitality: Food & Beverage | Preference No: _____ |
| <input type="checkbox"/> Hospitality: Kitchen | Preference No: _____ |
| <input type="checkbox"/> Hospitality: House Keeping | Preference No: _____ |

Internship Duration (in weeks) : _____

Start date of Internship : _____

NOTE: Please evaluate each skill of the language known (**Written, Spoken, Understanding**) within the scale from 2 to 5 and mark with + or any other relevant sign on the opposite side of each language.

2 - Average, not at ease communicating

3 - Good, can have a basic discussion

4 - Pretty fluent, comfortable and at ease

5 - Fluent, with excellent vocabulary

LANGUAGE	Written				Spoken				Understanding			
	2	3	4	5	2	3	4	5	2	3	4	5
English												
Russian												
German												
Other (please clarify)												

Additional Info

TOEFL Score (if tested)	
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Other Diplomas or Certificates (use blank page of you need more space)			
Computer Level	Basic	Medium	Advanced

Education			
Institution	Specialization	Duration/Years	Year of graduation/City/Country

WORK EXPERIENCE	
Position	
Company's name	
Period / City / Country	
Responsibilities	
Position	
Company's name	
Period / City / Country	
Responsibilities	
Position	
Company's name	
Period / City / Country	
Responsibilities	

ADDITIONAL INFORMATION	
Choreographic skills	
Sport skills	
Special skills / talents	

I have filled in all data carefully and truthfully.
Modifications important to my registration process shall be passed on to AVEC immediately.

Signature

Date : _____