

Language Centre Application Form

Personal Information	
Family name	
Given names	
Sex	
Nationality	
E-mail address	
Date of birth	
Profession	
Passport number	
Academic Information	
Are you a university student?	Yes <input type="checkbox"/> No <input type="checkbox"/>
What do you study?	
Name of your University	
Did you study Arabic before?	
If yes, how many hours/months/years?	
What do you want to use Arabic for?	
Other languages you know	1. 2. 3.
When do you plan to join the LC?	Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/>
Year	
Residency	
Address in your country	
Phone/Mobile	
Fax	
Address in Oman <i>(You may fill this when you come to Oman)</i>	
Oman phone/mobile	
Date	
Signature	