

APPLICATION FORM FOR EMPLOYMENT - BOURNEMOUTH		
APPLICATION INFORMATION		
LAST NAME	FIRST	
STREET ADDRESS		APPARTMENT/UNIT #
CITY		POST CODE
LANDLINE	MOBILE	
EMAIL		ID Card (DNI)
DATE OF BIRTH	GENDER	
MIN. LENGTH OF STAY (núm. Semanas)	MAXI. LENGTH OF STAY (núm. Semanas)	
START DATE		
TRAVEL COMPANION		
LEVEL OF ENGLISH		
OTHER LANGUAGES SPOKEN AND LEVEL		
DO YOU REQUIRE A PREVIOUS COURSE BEFORE TO START WORKING? Standard 20 Intensive 30 Super Intensive 40		
DO YOU REQUIRE AIRPORT TRANSFER? Yes No		
DO YOU REQUIRE TRAVEL INSURTANCE? Yes No		
EMERCENCY PERSON OF CONTACT		
NAME AND RELATION TO YOU		
MOBILE PHONE	WORK PHONE	
DISCLAIMER AND SIGNATURE		
I accept the terms and conditions of Mag'Work&Travel. I confirm that all the information above is true. I hereby authorized Mag'Work&Travel to collect personal information about me, which directly relates to this application, from the persons named above.		
SIGNATURE	DATE	
Please arrange to include with this application a couple of "happy smiley" photos and your most current CV.		