



Application form Orientation to 6-12 AMI Certificate Course

1. Personal information*								
Name and Surname								(2)
Adress								
Cityzenship								
Date of birth								
e-mail								
Phone								15
Profession								
Employer								
2. Education (cronologi	cally)							j
Name of the school/college/other		City	From month/year	To mont	To onth/year		Degree	
	93					42		
	93	0		13				
		ti.						5
3. Employment histro	y: (Relevar	nt experience, esp	pecially with childr	en)		-		
Employer		Responsabilities			From month/year		500	To month/year
							- 51	
4. Foreign languages			Understanding		Speaking		Writing	
						(i		
5. Please answer the following questions:								
1 What made yo	ou choose t	o participate at th	nis Montessori Co	urse?				

	2.	- How and in what circumstances do you think you will use the information you will get?
	3.	- How did you find out about this course?
T ce	rtifv	that my answers are true and complete to the best of my knowledge

Signature Data

Documents needed for enrollment:

- CV
- Copy of the ID
- Application form filled and signed

All the above documents will be uploaded on the website at the "ENROLLING IN A COURSE" section or sent to curs@institutulmontessori.ro.