

GLOBAL CITIZEN PROGRAM. INSCRIPTION FORM

First Name: _____ Last Name: _____

Gender Female Male Passport nº: _____ Country: _____

UCH Email: _____ Personal Email: _____

Phone nº: _____ / _____ Spanish DNI/NIE nº: _____

Address: _____ Postal Code: _____ City: _____

Current year at UCH: 1 2 3 4 more Degree/Academic Major: _____

Country of birth: _____ Country of your family actual residence: _____

Mother language*?: _____

List your actual language skills and your level of proficiency:

Language	level	A2	B1	B2	C1	C2/native
English		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
French		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please, list all the cities and countries have you have lived or studied abroad in:

Have you ever done and international exchange for studies, practice or volunteering? : YES NO

If yes, please fulfill the table.

Country	Type of mobility (studies, practice, volunteering)	Duration (weeks)
