

REGISTRATION GROUP COURSES ADULTS

GOETHE-INSTITUT IN GERMANY



Please submit the registration form by email to

Please use Adobe Acrobat to fill in the form. If you use other programmes the correct display and transmission of the information is not guaranteed. [Free download here.](#)

Personal data course participant

male female other

First name (as shown in passport)*

Last name (as shown in passport)*

Date of birth*:
Day Month Year

Place of birth*

Country of birth*

Nationality

Email*

Telephone (including country code)

c/o

Street/No.

Postal Code/City

Place of residence/Region*

Deviating billing address

Name of Company/Institution

Department

First name (as shown in passport)

Last name (as shown in passport)

Email

c/o

Street/No.

Postal Code/City

Place of Residence/Region

Information pursuant to Article 7(3) of the German Act against Unfair Competition: We may inform you about similar products and services to those you have purchased. For instance, we may share information about our language courses with you. You can object to this at any time, e.g. by emailing widerrufnewsletter@goethe.de. Raising an objection will not incur any costs except for the usual rates to facilitate communication, such as Internet dial-up costs. For information about data protection and the measurement of success, please visit [data protection notes](#).

In which language do you wish to receive the booking confirmation / invoice?

Deutsch English Français Italiano Español

I wish to book the following course
(See information at www.goethe.de/germany)

Intensive Courses

- Intensive German
- Intensive German Concise
- German Refresher
- Examination Preparation in a Group
- Intensive German 50 Plus

Other Courses

- German in the Evening/Morning/ on Weekends
- German Blended Learning (usually Saturdays or Evenings)
- German for Legal Professionals
- German for Architects

Online Courses

- German Online Group Course
- German Online Group Course on Saturday
- Intensive German Online
- Examination Preparation in a Group
- German Individual B1 Exam Preparation
- German for Work B1
- German for Work B2
- German for Nurses B2

or

Course date(s)*:

from 20 to 20
Day Month Year Day Month Year

Alternative location

I wish to book the following accommodation
(See information at www.goethe.de/germany)

- Guesthouse
- Single room
- Smoker¹
- Shared flat
- Twin-bedded room
- Non-smoker
- Apartment

¹Please note that in most cases smoking is strictly prohibited in the accommodation.

The Goethe-Institut hereby notifies course participants that they are responsible for any damage of whatever nature caused by them.

- I have read and accepted the **Data Protection Declaration**.*
- By submitting the form by email, fax or letter I acknowledge the Terms and Conditions.* **Terms and Conditions** for customers with habitual abode in an EU country. **Terms and Conditions** for customers with habitual abode outside an EU country. Information on Terms and Conditions EU and RoW, see [here](#).

Submitted by

Participant number _____

Name of Goethe-Institut _____

Goethe-Institut number _____

Name of agency/partner _____

Agency/Partner number _____

Self-assessment of German skills

To ensure that we can enroll you in a suitable course, we kindly ask you to answer all of the following questions. We reserve the right to send you our digital placement test before the start of the course by email.

Do you already have previous knowledge of German? Yes No

If you selected „Yes“, please continue.

How long have you been learning German?

Month(s)

Year(s)

Hours per week on average

Which textbook did you study last with?

At what level was your last German course? A1 A2 B1 B2 C1 C2

Have you taken any of the following exams?

Goethe-Zertifikat A1: Start Deutsch 1 Goethe-Zertifikat B1 Goethe-Zertifikat C1 TestDaF

Goethe-Zertifikat A2 Goethe-Zertifikat B2 Goethe-Zertifikat C2: Großes Deutsches Sprachdiplom Other exam

Recommendation by a Goethe-Institut

If you are studying or have studied at a Goethe-Institut in Germany or abroad, our colleagues will be happy to give you a placement recommendation.

_____ von Tag Monat 20 Jahr bis Tag Monat 20 Jahr
Frau / Herr

_____ im GI _____ die Kursstufe mit _____ Unterrichtsstunden¹ besucht.

We recommend a course on the following level: A1 A2 B1 B2 C1 C2

¹Eine Unterrichtsstunde = 45 Minuten

FINALIZE ORDER

RESET FORM