

**EUROPEAN SCHOOL OF ENGLISH LTD.**

PACEVILLE AVENUE, ST. JULIANS STJ 3103, MALTA

# TEL: 21373789

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| **APPLICATION FOR TEFL INDUCTION COURSE 2024** |

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| Name: | |
| Address: | |
| Telephone numbers: (Home/work/mobile) | |
| Email: | |
| Date of Birth: | I.D. Number: |
| Nationality: | |
| If you are a foreign resident in Malta please give details of your work permit or freedom of movement: | |
| Have you passed A level English or the TELT and SEPTT at C grade and above? | When? |
| Please give details of other A levels: | |
| Are you a student at the university?  Please give details of course etc. | |
| Other qualifications: (degree/diplomas) | |
| Any (EFL) teaching experience (Dates, school/s, students’ ages and levels taught) | |
| The TEFL course is demanding of time and energy. How will you be able to manage your present commitments and the course work? | |
| Employment History – please give details of any other work experience | |
| Why are you taking this course: | |
| Will you be available for work? | |
| Please give details. Flexi-time 8.45a.m. to 2.30p.m./ 6.30pm Part-time (seasonal),summer, university holidays, give other details etc. | |
| Hobbies and interests: | |
| ESE wants to make sure you get the most out of your course and that you are fully supported whilst you are studying with us. Do you consider yourself to have any disabilities or medical conditions you feel we should know about?  Yes £ No £  If ‘Yes’ please give details. | |

Signed: ………………………………….…….. Date:……………………..

Office use only

Accepted / Not Accepted Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_