



Università degli Studi di Napoli Federico II
Centro Linguistico di Ateneo

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ITALIAN L2 COURSE ENROLMENT FORM

LLP/ ERASMUS STUDENTS

Family name: _____

First name: _____

Date and place of birth: _____

Nationality: _____

Home University: _____

Native language: _____

Gender: M ☐ F ☐

Telephone number: _____

Mobile phone: _____

E-mail address: _____

Home address: _____

City: _____

Country: _____

Address in Naples:

Faculty/School: _____

Degree course: _____

Name, e-mail address and telephone number of home University tutor:

Name, e-mail address and telephone number of Università degli Studi di Napoli Federico II tutor:

Have you ever studied Italian? Yes ☐ No ☐

Have you ever been to Italy? Yes ☐ No ☐

Are you interested in exchanging conversations with native speakers of other languages?

Yes (specify one or more preferred languages) ☐

No ☐

In compliance with D.Lgs 196/2003, your personal data will only be used for the organisation and management of the learning activities they were released for.