

Immersion days

Thank you for considering l'Institut français d'Écosse for your school.

Upon completion of this form, please mail it back to charlotte.hyvernaud@diplomatie.gouv.fr

School Name	
Coordinator Details	Name Contact
Location	<input type="radio"/> At the Institut français d'Écosse <input type="radio"/> At the School Address:
Date (suggest 2)	Option 1: Option 2:
Duration	<input type="radio"/> Half day (3 hours) → Preferably <input type="radio"/> AM <input type="radio"/> PM <input type="radio"/> Full day, state your preferred time:

Number of learners	Primary	____P1 ____P2 ____P3 ____P4 ____P5 ____P6 ____P7
	Secondary	____S1 ____S2 ____S3 ____S4 ____S5 ____S6

Are there any specific themes you request for the film and/or the workshops? If yes which ones?	
What is the level of your students in French?	
What skills in French language do you want your students to practice?	

DATE