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Visit to the European Centre for Modern Languages (ECML) of the Council of Europe

Please return this form to information@ecml.at at least 3 weeks before the requested date of your visit

Date of request:				
Institution:				
Contact person:				
Phone number:				
THOMS Hambon				
E-mail:				
Visitor(s) profile				
Number of people:	Ag	je group (pupils, studei	nts):	
Working language(s):	English	French	German	
Date and duration of your visit				
You can suggest 3 dates (in preferred order):				
	Date	Arrival time	Duration of the visit	







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Aim o	Aim of your visit:				
Topic	s which	are particularly interesting for me/my group:			
1.	. The Council of Europe and its work in the field of language education				
2.	. The ECML: general information				
3.	. The ECML 4-year programmes of activities				
4.	. The ECML resources				
	a.	Online resources and databases			
	b.	Visit of the documentation centre of the ECML			
	C.	The ECML communication policy: social media, news page, newsletter			
5.	The European Day of Languages				
6.	The ECML traineeship and fellowship programme				
Speci	al requ	ests: I/We would be particularly interested in the following			
projed	ct/them	atic area:			