

ESCUELA SUPERIOR DE MÚSICA  
REINA SOFÍA

*2000-2001 Academic Year*

ENROLMENT APPLICATION

PERSONAL DATA

SURNAME .....

FIRST NAME ..... SEX    M     F

AGE .....    DATE OF BIRTH .....

NATIONALITY .....

I.D. OR PASSPORT NUMBER .....

ADDRESS

STREET.....    NO. ....

POSTAL CODE .....    TELEPHONE .....

TOWN OR CITY.....    FAX .....

PROVINCE.....

COUNTRY.....

ACADEMIC INFORMATION

INSTRUMENT OR RANGE .....

MUSICAL TRAINING and educational centres attended (Higher Education / Conservatory / Private Studies): .....

Applicants for Voice Auditions shall specify present year of studies, other instruments and solfeggio level .....

TEACHERS (indicate place and duration of studies with each one): .....

LANGUAGES (indicate proficiency: elementary, intermediate, advanced): .....

I WISH TO APPLY FOR A SCHOLARSHIP

Tuition	yes	<input type="checkbox"/>	no	<input type="checkbox"/>
Residence	yes	<input type="checkbox"/>	no	<input type="checkbox"/>