

Application form for Sogang University Opportunity(Delivery partner required for training programme for visually impaired students)

Name of
institution*:
(*This format will be used in all publicity)
Main contact:
Telephone:
Fax:
E-mail:
Contact address:
Have you attached a draft for the training programme?
Can you provide an accommodation that is suitable for visually impaired students?
Can you provide an interpreter who is fluent in Korean? If yes, how much is the additional charge?

Why do you believe your institution should deliver this training for Korean teachers?

DECLARATION	
opportunity for an English program understand that if this application	rganisation does want to take part in the mme for visually impaired Korean students. I is accepted that the terms and conditions listed between this organisation and Sogang University.
Signature of applicant	Institution's stamp
Date	

Terms and conditions:

1. Eligibility

All participating institutions must meet the British Council Services for International Education Marketing Criteria https://siem.britishcouncil.org/eligibility-criteria

2. Terms for service

All institution representatives must abide by the British Council Services for International Education Marketing terms for service: https://siem.britishcouncil.org/terms-service.