





Nikolaiplatz 4, Austria-8020 Graz Tel: +43-316-32 35 54 e-mail: verein.efsz@ecml.at

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

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

Date of request:				
Institution:				
Contact person:				
Phone number:				
E-mail:				
Visitor(s) profile				
Number of people:	A	Age group (pupils, stude	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 of your visit:			
Topic	s which are particularly interesting for me/my group:		
1.	1. The Council of Europe and its work in the field of language education		
2.	2. The ECML: general information		
3.	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		
Specia	al requests: I/We would be particularly interested in the following		
projec	ct/thematic area:		