



Registration form for the course “Deutsch plus Beruf” in cooperation with the Dieter Schwarz Foundation 2025

Please send the completed form by e-mail to

teacherservice-chicago@goethe.de by

02.03.2025.

Name (as in passport or birth certificate)	
Date of Birth	
Class	
Name of the School	
Private address	
E-Mail address	
Phone number	
Career aspiration	
Language level (please mark with a cross)	<input type="checkbox"/> B1 <input type="checkbox"/> B2/C1

(Place, date)

(Name and signature of parents)

(Name and signature of the school management)

**GOETHE
INSTITUT**

Sprache · Kultur · Deutschland