

English Language Test

Please complete this form and send it to wendi.zimmermann@uni-konstanz.de before the language test.

Last name:

First name:

Matriculation number:

**Course of study
& semester:**

Home university if not Uni Konstanz:

Reason for taking the English Language Test:
(e.g. 1) Erasmus application, University of Amsterdam)

1) Erasmus at

2) Internship at

3) Other (please give
details)

Test date: