**English Conversation Program Registration Form**

Welcome to the English Conversation Program (ECP)! Our teachers are volunteers who enjoy meeting and working with people from other countries. ECP will give you the opportunity to practice and improve your English skills in a comfortable and supportive environment with other international visitors.

To apply for this program, please fill this form out and email it to the ECP coordinator, Lisa Hammock, at lisahammock805@gmail.com. More information is available on the [OISS website](https://oiss.ucsb.edu/programs/english-conversation-program).

First Name: Click or tap here to enter text.

Last Name: Click or tap here to enter text.

Address (Number, Street, and Apt #): Click or tap here to enter text.

Address (City and Zip Code): Click or tap here to enter text.

Phone number: Click or tap here to enter text.

Email address: Click or tap here to enter text.

Home Country Address: Click or tap here to enter text.

First Language: Click or tap here to enter text.

**What is your connection to UCSB?**

UCSB Student (yes or no): Click or tap here to enter text.

Spouse of UCSB Student (yes or no): Click or tap here to enter text.

If yes, Spouse’s Name: Click or tap here to enter text.

Researcher/Faculty/Scholar (yes or no): Click or tap here to enter text.

Spouse of Researcher/Faculty/Scholar (yes or no): Click or tap here to enter text.

If yes, Spouse’s Name: Click or tap here to enter text.

With which department are you or your spouse associated? Click or tap here to enter text.

**About You (this information helps us plan activities to suit your needs)**

What is your occupation in your home country? Click or tap here to enter text.

Are you married? Click or tap here to enter text.

If Yes, what is your spouse’s occupation in your home country? Click or tap here to enter text.

Do you have children with you at UCSB? Click or tap here to enter text.

If Yes, what are their ages? Click or tap here to enter text.

What are your hobbies or interests? Click or tap here to enter text.

How long do you plan to be in Santa Barbara? Click or tap here to enter text.

Do you have a California Driver’s License? Click or tap here to enter text.

Do you have access to a car? Click or tap here to enter text.

For ECP Coordinator use only: Fall  Winter  Spring

Paid $

Waived:  By (please initial): Click or tap here to enter text.