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	<p align="center">ISTITUTO D'ISTRUZIONE SUPERIORE "LEONARDO DA VINCI"</p> <p align="center"><i>CON SEZIONI ASSOCIATE LICEO SCIENTIFICO - LICEO CLASSICO - LICEO ARTISTICO - I.T. CAT</i></p> <p align="center"><i>Via L. da Vinci - 08045 Lanusei (Nu)</i> <i>tel. 0782/42624 - fax 0782/480198 - E Mail: liceolanusei@libero.it</i></p> <p align="center"><i>Codice Fiscale: 91005600910 - C.M. NUIS01600V</i></p>	
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This form has the exclusive purpose of investigating the presence of migrant guests at reception centers in Ogliastro in order to assess any training interventions for integration.

1. THE HOST FACILITY

NAME OF THE ORGANIZATION:			
NAME OF THE HOLDER:			
Address	Town	Phone number	Email address

2. FEATURES

Short description of the typology of the host facility
Capacity (specify the number of beds, rooms, common spaces)

3. MIGRANTS

Total number of migrants in the host building at the moment: ()		Males: () Females: ()		
Education level:				
Illiterate ()	Primary school ()	Secondary school ()	Qualification ()	Graduation ()
Age:				
Underage ()	18-25 ()	26-35 ()	36-45 ()	46-55 ()
Spoken languages:				
Past attended courses: - - - -				
Attended courses at the moment: - - - -				
Would your organization consider useful afternoon activities to support study and process of integration in working environment?				
Yes ()	No ()	Reasons:		