

English Conversation Group

Adult Participant Application 2020-21



Date _____

About You

Name _____

Address _____

Phone (home) _____ (mobile) _____ (work) _____

E-mail _____

The best way to contact me is by: Home phone Mobile Phone Work Phone E-mail

When can you come?

Virtual Zoom Meetings

Tuesdays

10:00am-12:00pm | Send to: aginfodesk@halifax.ca

1:00-2:30pm | Send to: kgconversation@halifax.ca

Thursdays

10:00-11:30am | Send to: centralconversation@halifax.ca

3:30-5:00pm | Send to: kgconversation@halifax.ca

Keshen Goodman Public Library

In-Person Sessions

330 Lacewood Drive, Halifax
(902) 490-5738 | kgconversation@halifax.ca

Mondays

6:30-8:00pm

Wednesdays

10:00-11:30am

Saturdays

10:30am-12:00pm

PLEASE NOTE:

To keep everyone safe through social distancing, we encourage you to register for online sessions. Our in-person spots are reserved for newcomers without access to the Internet or technology.

Tell us about you

I am a Canadian Citizen

I have a work visa

My country of origin is: _____

I am a Permanent Resident

I am visiting

My native language is: _____

I am an International Student

Other

My English level is: Beginner Intermediate Advanced

Confidentiality agreement

During and after my time as a Halifax Public Libraries participant, I hereby agree to respect the privacy of everyone involved in the Halifax Public Libraries English Conversation Group for Adults program. I will keep all information about participants confidential and will not discuss this information with anyone except the program coordinator.

Signed _____ Date: _____

PROGRAM USE ONLY

Location/Branch: _____ Date: _____

Co-ordinator/ Staff Person: _____

NOTES: