



Questionnaire Dutch Course

Please complete this form if you do not speak Dutch at all.

Personal Information

Name: -----
Company: -----
Job Title: -----
Mother tongue: -----
Other languages: -----
Telephone number: -----
E-mail address: -----

Questions

1. How long have you been living in the Netherlands? -----

2. Have you attended any Dutch courses before? -----

3. Which skills and subject(s) would you like to pay attention to when doing a Dutch course?

- Grammar
- Fluency
- Idioms and Vocabulary
- Sentence structure and word order
- Writing
- Listening

4. In which situations will you speak Dutch?

- Informal contacts
- Formal contacts within the company
- Formal contacts outside the company
- Telephoning
- Contacts with public bodies
- Meetings at work
- Social gatherings (dinner parties, parties etc.)

5. For which purpose(s) will you write in Dutch?

- Memos at work
- Project proposals
- Business correspondence
- external
- internal
- Translations from other languages

Please send this form to:

Polytaal
Logger 221
1186 MH Amstelveen

Or send us this form by fax : 020 -643 29 06.