

## OXFORD BIBLICAL HEBREW SUMMER SCHOOL APPLICATION (2019)

<b>Personal Details</b>		
Title	First Name	Last Name
Address		
Postcode		
Daytime Tel.		Home Tel.
Mobile Tel.		Email
Date of Birth		Gender M <input type="checkbox"/> F <input type="checkbox"/>
Student <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>		Professional <input type="checkbox"/>
Name of Institution		
Address		
Postcode		
Degree Programme		

Have you had previous experience with Semitic Languages? Please be specific

Please outline your reasons for wishing to take the course

Please complete all sections and return the application form to OBHSS, Oxford Centre for Hebrew and Jewish Studies, Clarendon Institute, Walton Street, Oxford, OX1 2HG or by Email to: [sue.forteath@ochjs.ac.uk](mailto:sue.forteath@ochjs.ac.uk)

For general enquiries about the course, please email Dr Stephen Herring: [stephen.herring@orinst.ox.ac.uk](mailto:stephen.herring@orinst.ox.ac.uk).