



NOMINATION OF PARTICIPANTS / NOMINATION DE PARTICIPANTS

Country / Pays : Austria

Workshop / atelier 6/2009

5 – 7 November / novembre 2009

1.

First names / <i>prénoms</i> : Catherine Mary	Surname / <i>nom</i> : Lewis
Form of address / <i>titre</i> : <input type="checkbox"/> x Ms / <i>Mme</i> <input type="checkbox"/> Mr / <i>M.</i>	
Address for correspondence / <i>Adresse à utiliser pour la correspondance</i> : Wielandgasse 44, A-8010 Graz. Austria	
City / <i>Ville</i> : Graz	Email / <i>adresse électronique</i> : catherine.lewis@utanet.at
Code / <i>code postal</i> : A-8010	Tel / <i>tél</i> : 0316/831923
Country / <i>pays</i> : Austria	Fax / <i>télécopie</i> : 0316/821133

2. Preferred working language: German, CEFR level: C2

Command of other workshop language / A level qualification, GB, CEFR level: B1

3. Professional background: language teacher, teacher trainer (English at primary level), course development, CLIL

4. Experiences and expertise: EFLteacher at primary level, teacher trainer courses for primary school teachers, Pilotierung ESP für die Grundschule SJ 2008/09

5. Multiplier's capacity: Courses for primary school teachers at Pädagogische Hochschule, Language Workshop at Kinderuni, Pilot teacher ESP in der Grundschule 2008/09.



