

**Application Form for the *ERASMUS* Programme**

**Academic Year 20..... / 20.....**

**Fall Semester**

**Spring Semester**

**Whole academic year**

**This application form should be completed in black.**

**1. HOME UNIVERSITY/SENDING INSTITUTION**

Name of university: .....

Full Address: .....

.....

ERASMUS-Code: .....

Contact: .....

Telephone, e-mail: .....

Number of ECTS credits required: .....

**2. STUDENT DETAILS (Please write in capitals)**

Surname/First name: .....

Sex M / F: .....

Date of Birth: .....

Place of Birth: .....

Nationality: .....

Current Address:

.....

.....

Permanent Address (for all correspondence):

.....  
 .....  
 Tel: .....  
 E-mail: .....

**3. DISABILITY DECLARATION**

Do you have a disability, impairment or long term medical condition which may affect your studies? Please answer *Yes* or *No*.

Yes      No

If *Yes*, please indicate the area of impairment with a tick:

Hearing                  Learning                  Mobility                  Vision                  Medical

Other: .....

**4. PREVIOUS AND CURRENT STUDIES**

Diploma/Degree currently being prepared: .....

Number of years of tertiary education undertaken prior to departure abroad: .....

Have you ever studied abroad? .....

If *yes*, at which institution did you study? .....

**5. LANGUAGES**

Mother tongue		.....		
Language of instruction at home institution		.....		
Other languages	I am currently studying this language ( <i>please tick</i> )		I have sufficient knowledge to follow lectures in this language ( <i>please tick</i> )	
French	Yes	No	Yes	No
English	Yes	No	Yes	No

## 6. MOTIVATION

Briefly state the reasons why you wish to study abroad.

<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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Please enclose the following:

- **3 photographs**
- **Your resume**
- **All university reports with marks**
- **Photocopy of your passport or identity card**

<p>I certify that the information given on this application is complete and accurate to the best of my knowledge.</p> <p><b>Student's signature:</b></p> <p>Date:</p>	<p>This student has been selected to participate in the Erasmus exchange programme existing between our institution and ESCI.</p> <p><b>Name and signature of university contact:</b></p> <p>Date:</p> <p>University stamp</p>
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***We can not deal with any applications without the agreement of the student's university.***

***N.B. The application must arrive at the ESCI before the***

***30th of June for the autumn semester  
30th of November for the spring semester***

**ESCI  
(Relations Académiques Internationales)  
50, rue de la Maison Rouge - Lognes  
77437 Marne-la-Vallée cedex 2  
France**