



**APPLICATION FORM FOR THE « ALLIANCE » PROGRAMME
ACADEMIC YEAR 20..... / 20.....**

This application form should be completed in black.

1. HOME INSTITUTION

Name of Sending Institution:

Full Address:

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Name of Contact Person:

Telephone, e-mail :

2. STUDENT DETAILS

Surname/First name:

Sex M / F:

Date of birth:

Place of birth:

Nationality:

Current Address:

.....

.....

Permanent Address (for all correspondence):

.....

.....

Tel:

E-mail:

Please enclose the following:

3 photographs of yourself
Your CV in French
Evidence of your French level
All university reports with marks
Photocopy of your passport or identity card.

<p>Student's signature:</p> <p>Date:</p>	<p>Name and signature of university contact:</p> <p>Date:</p> <p>University stamp</p>
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N.B. The application must arrive at the ESCI before the

30th of June for the autumn term
30th of November for the spring term

We can not deal with any applications which do not have the agreement of the student's university.

ESCI / PROGRAMME ALLIANCE
Relations Académiques Internationales
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