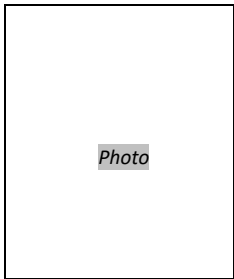




# Student Application Form

International Student Exchange Programmes  
 Fiche d'inscription Erasmus+ et Coopération



It is important that you write neatly using **BLOCK CAPITALS in black ink**. Incomplete Application Forms submitted without ALL the supporting documents will delay the decision process. This Application Form must be returned to us before June 15<sup>th</sup> for the fall semester, and November 15<sup>th</sup> for the Spring Semester.

Academic Year : 20...../20.....	Period of study : <b>from:</b> <b>to:</b>	Duration of stay : <input type="checkbox"/> 1 <sup>st</sup> /Autumn semester <input type="checkbox"/> 2 <sup>nd</sup> /Spring semester	<input type="checkbox"/> Full Academic year
Cooperation program :	<input type="checkbox"/> Erasmus+	<input type="checkbox"/> Bilateral agreement	

## Receiving Institution

Name: **Institut Catholique de Toulouse**

Address : **31 rue de la Fonderie 31000 Toulouse – FRANCE**

Name of the Faculty :

Field of study :

### International Relations Office

<b>Head of international partnerships and exchange programs</b>	<b>Assistant Research/ International Relations Office</b>
Name: Ms Annie Despatureauux	Name: M. Christian GUALLAR
Phone: 0033 (0)5 61 36 81 00	Phone: 0033 (0)5 61 36 81 00
Fax: 0033 (0)5 61 36 81 08	Fax: 0033 (0)5 61 36 81 08
E-mail: <a href="mailto:annie.despatureauux@ict-toulouse.fr">annie.despatureauux@ict-toulouse.fr</a>	E-mail: <a href="mailto:christian.guallar@ict-toulouse.fr">christian.guallar@ict-toulouse.fr</a>

## Sending Institution

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Faculty : \_\_\_\_\_ Website : \_\_\_\_\_

Departmental Coordinator: \_\_\_\_\_ Institutional Coordinator: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ E-mail: \_\_\_\_\_

## Student's personal data

Family name: _____	First name: _____
Date of birth: _____	Place of birth: _____
Nationality: _____	Gender : <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other
Passport/ID number : _____	Expiry date : _____
Visa number : _____	Expiry date : _____
Phone : _____	E-Mail : _____
Status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Religious <input type="checkbox"/> Other.....	
<b>Current correspondence address:</b>	<b>Address in Toulouse :</b>
Street: _____	Street: _____
Post Code: _____	Post Code: _____
City: _____	City: _____
Country: _____	Country: _____
Current address is valid until: _____	<b>Room booking :</b> <input type="checkbox"/> Campus des Carmes <input type="checkbox"/> Résid. Chapou <input type="checkbox"/> Colline des Sciences <input type="checkbox"/> Other

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## ■ Language skills

Mother tongue:

Language of instruction at the home institution:

Level of French language

A1  A2  B1  B2  C1  C2

Certificate or DELF test ?

Yes

No

If yes, send us the certificate or attestation

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## ■ French extensive course

ICT organizes free French extensive course in the first/second semester, **only if the number of participants is sufficient:**

I would like to attend the French extensive course that will run from September to December 2020

I would like to attend the French extensive course that will run from February to April 2021

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## ■ Previous and current studies

Higher education study years prior to departure abroad:

Institution :

Country :

Degree for which you are currently studying:

Date when you began these studies:

Date when you expect to complete them:

Have you already been studying abroad?

Yes

No

If yes, when and at which Institution?

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## ■ How did you hear about Toulouse Catholic University?

Website

Social Media

Exhibition

Search Engine

School/College

Advertising

Recommendation (family/friend)

Partner Institution

Agent

Alumni

Colleague

Other, please specify.....

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## ■ Signature of the student

I declare that all details given in this application form are correct and complete.

Date, place and signature

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