

IPSA-EPITA SUMMER SCHOOL

YEAR 2021

*If filled by hand, this form should be completed in black and capital letters.*

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| STUDENT PERSONAL DATA (to be completed by the applying student) |
| Family name |  |
| First name(s) |  |
| Gender | [ ]  Female [ ]  Male |
| Date of birth (DD/MM/YYYY) |  |
| Place of Birth |  |
| Nationality |  |
| Address |  |
|  |
| Phone number (with area code) |  |
| E-mail address |  |
| Current degree followed  |  |
|  |
| Number of higher education study years  |  |
| Disability | [ ]  Yes [ ]  No |
| If yes, please indicate your disability |  |

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| CHOICE OF PROGRAM FORMAT  |
| [ ]  ONLINE | [ ]  ONSITE |

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| LANGUAGES COMPETENCES |
| Mother tongue: |
| Other languages | (Estimated) Level | You are currently studying this language | You have sufficient knowledge to follow lectures |
| Yes | No | Yes | No |
| English |  |  |  |  |  |
| French |  |  |  |  |  |
| Other: |  |  |  |  |  |

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| PREVIOUS HIGHER EDUCATION |
| Year | University | Field of Study | Diploma / Degree Obtained |
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| BRIEFLY STATE THE REASONS WHY YOU WISH TO FOLLOW THIS SUMMER PROGRAM |
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| STUDENT’S DECLARATION |
| I hereby declare that the information provided above is accurate and that, if accepted, I will abide by the rules and regulations of IPSA and EPITA. |
| Student’ signature: | Date: ……………….……../…………………………/………………………….. |

This form must be submitted to

**international@ipsa.fr** **and summer@epita.fr**

Deadline application: **May 31, 2021**

Your application must be accompanied by the following documents:

* Previous and current transcripts of records in English
* Photocopy of a valid passport or ID
* Proof of English proficiency