

# STUDENT APPLICATION FORM

LASTNAME \_\_\_\_\_ FIRSTNAME \_\_\_\_\_

Please return the student application form to

Université de Neuchâtel, Bureau mobilité, Avenue du 1<sup>er</sup>-Mars 26, rez-de-chaussée**DEADLINE : 15 February****STUDY STAY**

- Mobility within convention
- Swiss European Mobility Programme (Ex Erasmus)
- Free Mobility (without convention / programme)

**Academic year** \_\_\_\_\_**Period of study**

- Full academic year
- Fall Semester
- Spring Semester

**Study field** \_\_\_\_\_**Level**  Bachelor  Master  Doctorat**HOST INSTITUTION**

Name \_\_\_\_\_

Country \_\_\_\_\_

**STUDENT'S PERSONAL DATA**

Lastname \_\_\_\_\_ Firstname \_\_\_\_\_

Date of birth \_\_\_\_\_

Nationality \_\_\_\_\_

Registration number (no. d'immatriculation) \_\_\_\_\_

Passport or ID Card nr \_\_\_\_\_

Sex  M  F

**PERMANENT ADDRESS**

Address \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Phone Number \_\_\_\_\_ E mail \_\_\_\_\_

**CURRENT ADDRESS, VALID UNTILL \_\_\_\_\_**

Address \_\_\_\_\_  
City \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Phone Number \_\_\_\_\_ E mail \_\_\_\_\_

**PREVIOUS AND CURRENT STUDIES**

Degree for which you are currently studying \_\_\_\_\_  
Number of higher education study semesters prior to the departure abroad \_\_\_\_\_

**MOTIVES**

State the reasons why you wish to study abroad.

**SWISS EUROPEAN MOBILITY PROGRAMME (EX-ERASMUS) SCHOLARSHIP**

Question reserved for the candidates applying for a SEMP exchange

Have you ever received an ERASMUS scholarship ?

No     Yes    if yes, in which academic year ? \_\_\_\_\_

**LEARNING AGREEMENT**

The learning agreement should be sent to the Bureau de la mobilité no later than 6 weeks before the classes commence unless otherwise specified by the home university. The changes should be sent no later than 3 weeks after the beginning of the semester.

**PLEASE SIGN AND HAVE THE FORM SIGNED BEFORE SENDING IT TO THE [bureau.mobilite@unine.ch](mailto:bureau.mobilite@unine.ch)**

**DATE AND STUDENT'S SIGNATURE** \_\_\_\_\_

**THE FACULTY**

|  |                           |
|--|---------------------------|
| <b>THE PROFESSOR IN CHARGE OF THE CURSUS OR OF THE AGREEMENT</b> | <b>THE STUDY ADVISOR</b>  |
| <b>DATE<br/>SIGNATURE</b>  | <b>DATE<br/>SIGNATURE</b> |

**Annexes :**

- *Cover letter (clarify the number of ECTS you plan to obtain and in which study field)*
- *Transcripts of records (= relevé de notes)*