



## INCOMING STUDENT APPLICATION FORM ACADEMIC YEAR 2024- 2025

Please fill in this form (CAPITAL LETTERS), sign, get signed by your institution coordinators and send back by e-mail to [bureau.mobilite@condorcet.be](mailto:bureau.mobilite@condorcet.be)  
**!/\ Note that our courses are provided in French**

FIELD OF STUDY	→	
TYPE OF MOBILITY	→	Internship / courses ( <i>Delete as appropriate</i> )

<b>STUDENT PERSONAL DATA</b>		
Name:	First name:	<div style="border: 1px solid black; width: 100%; height: 100%; display: flex; align-items: center; justify-content: center;">             Picture           </div>
Date of birth:	Place of birth:	
Age:	Sex: M/F	
Nationality:		
ID or passport number:		
Current address:		
Permanent address (if different):		
Phone number:		
E-mail:		
❖ Please attach a copy of your identity card (both sides).		

<b>PREVIOUS AND CURRENT HIGHER EDUCATION STUDY</b>
Degree program you are currently studying for: Number of higher education years prior to departure abroad: What is your level of FRENCH (minimum B1-B2 required)? ❖ Please attach the transcript of record of the last year and a certificate of your French language level.

<b>STUDY PERIOD AT THE HEPH CONDORCET</b>
Duration: ..... months      →      From ...(day)/...(month)/...(year) to .../ .../.... Number of expected ECTS: ....

**COMPLEMENTARY INFORMATION**

**Specific needs:** Do you have any specific physical, mental or medical needs that require special attention and assistance ? Yes- No

If yes, please contact the support service for students with specific needs (SAPEPS) the month before your arrival for assistance ([nathalie.vanzeveren@condorcet.be](mailto:nathalie.vanzeveren@condorcet.be))

**University college life:** For a better integration, do you want to be mentored by a local student? You'll get paired with another student. This system helps to promote friendship, better support of coursework, behavioral and social needs, and can foster a greater sense of belonging and a more inclusive school community. Yes - No

**RECEIVING INSTITUTION ERASMUS CODE : B MONS 23**

**Name:** HEPH Condorcet

**Address:** Digue de Cuesmes, 29 - 7000 Mons (Belgium)

**Institutional coordinator :** Claire AVRIL +32 479 94 73 85 ▪ [bureau.mobilite@condorcet.be](mailto:bureau.mobilite@condorcet.be)

**Departmental coordinator :**

**SENDING INSTITUTION ERASMUS CODE : ....**

**Name:**

**Address:**

**Institutional coordinator :**

**Departmental coordinator :**

*By signing this document, the host institution certifies that the student is covered by insurance that meets, at least, the requirements of the Erasmus agency.*

**SIGNATURES (+ stamp from the institutions)**

SENDING INSTITUTION		RECEIVING INSTITUTION	
STUDENT	Responsible	Departmental coordinator	Institutional coordinator
<b>Date:</b>	<b>Date:</b>	<b>Date:</b>	<b>Date:</b>