ACADEMIC YEAR **2017-2018**

**ENROLMENT APPLICATION FORM**

## 

S17………..

If you are enrolling for a selective academic course: Authorisation number

*For the rest of the form, please complete the shaded areas with the code matching your situation*



**PERSONAL DETAILS**

**LAST NAME**

**FIRST NAME**

Preferred (married) last name FIRST NAME 2

Date of birth *(DD/MM/YYYY format)* FIRST NAME 3  
Department or country of birth

Place of birth



Nationality

Gender:

Male

Female

**YOUR FAMILY SITUATION**

**1**-Alone without dependent children

**3**-Alone with (a) dependent child(ren)

**2**-With a partner without dependent children

**4**-With a partner with (a) dependent child(ren)

Number of children:

## Disability? (recognised by the MDPH) (this situation may allow you, depending on the regulations, to benefit from certain allowances)

|  |  |  |  |
| --- | --- | --- | --- |
| **A**-auditory | **M**-motor | **V**-visual | **AM**-motor auditory |
| **AV**-visual auditory | **MV**-motor visual | **T**-auditory, visual motor | **XX**-other |



**YOUR FIRST ENROLMENT IN A FRENCH HIGHER EDUCATION ESTABLISHMENT**

When was your first enrolment in **French** higher education (post-high school courses)? : year

Your first enrolment at a French university? : year

Establishment



**BACCALAUREAT OR EQUIVALENT DIPLOMA**

Baccalaureat or equivalent diploma specialisation

Grade  
Award year  
Award establishment

Department



**CONTACT DETAILS**

## Home address

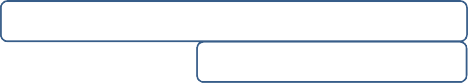


No. and road  
Building, Residence, c/o…  
Additional locality info

Postal code City/Town

Country

Foreign routing (city)



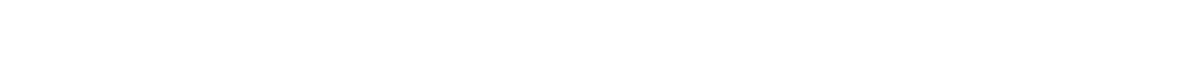
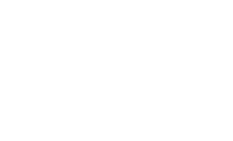
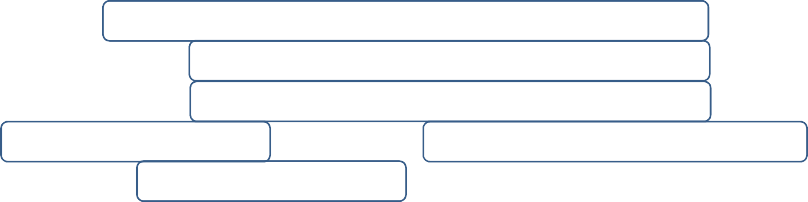
Landline phone

**Type of accommodation for the current year** **1**-university residence **2**-approved home **3**-HLM-CROUS accommodation (convention)

**4**-parents’ home **5**-staff accommodation (excluding student room)

**6**-student room **7**-other type of accommodation

## Address for the current year



No. and road  
Building, Residence, c/o…

Additional locality info

Postal code

Your mobile phone

Country

Foreign routing (city)

City/Town

Landline phone

Your personal email address

**YOUR ENROLMENT CATEGORY AND YOUR STUDENT STATUS**

**Enrolment category**

**1**-Initial training excluding apprenticeship

**3**-Unfunded resumption of studies **4**-Apprenticeship contract

**5**-Continuing training excluding professionalisation contract **6**-Professionalisation contract

**Student status**

**01**-Student

**04**-Apprenticeship training

**02**-Auditor

**03**-Continuing training trainee

**SI**-International cooperation trainee **FS**-ESPE public servant trainee

**YOUR PAID WORK (during the academic year)**

**Work**

**A**-Not working

**E**- Job > 6 months

**J**-Education assistant

**C**-Job <= 1 month

**D**-Job > 1 month and <= 6 months

**F**- Education helper

**H**-Paid student (Doctoral candidates, etc.)

**Your socio-professional category** Code

**Volume of work** **1**-Full time **2**-Part-time > than 150 hours/term or 600 hours/year

**3**-Part-time less than or equal to 150 hours/term or 600 hours/year

## Parents’ socio-professional category

Parent 1

Code

Code

Parent 2



**ARE YOU A HIGH-LEVEL ATHLETE?**

NO

YES

If yes, state the discipline: ……………………………………………………………

**HOW DO YOU FINANCE YOUR STUDIES?**

**B**-CIFRE scholarship **F**-Foreign government scholarship **H**-Bank loan **I**-Parents’ resources

**J-** Spouse’s resources **K**-Private sector employee

**Q**-CROUS scholarship (Higher education scholarship according to social criteria) **S**-French government scholarship

**T**-Mobility scholarship **V**-Scholarship pending

**1**-Doctoral contract **2**-CSD doctoral student **3**-ATER **4**-Without funding after doctoral contract

**5**-Additional mission (doctoral) **X**-Other financial assistance



**ARE YOU IN AN INTERNATIONAL EXCHANGE PROGRAMME?**

## Programme

**1**-ERASMUS **2**-TEMPUS **3**-COMENIUS **4**-LEONARDO DA VINCI

**5**- Other European Union programmes **6**-Inter-University agreements

**7**-EUCOR **8**-CREPUQ (Canada) **9**-MAUI (United States) **A**-AEN (Australia)

**B**-ERASMUS MUNDUS **K**-Free mover

**Other** specify: …………………………………………………………………….

**Direction of the exchange** **A**-Arrival at the University of Strasbourg **E**-Sent by the University of Strasbourg  
 Country of origin (*for reply A*) or host (*for reply E*)

Establishment of origin (*for reply A*) or host (*for reply E*)

# WHICH WAS THE LAST EDUCATION ESTABLISHMENT IN WHICH YOU WERE ENROLLED?

Type

Establishment name

**LY**-Lycée **00**-University **01**-BTS **02**-CPGE **03**-Business, Administration school **04**-Engineering school  
**05**-Private higher education establishment **06**-Art/Culture higher education establishment  
**10**-Foreign higher education establishment **11**-ENS **13**-Architecture school

**15**-Other school or pathway **17**-CNED **18**-Paramedical or social training **19**-Foreign secondary education establishment

Department or country Year

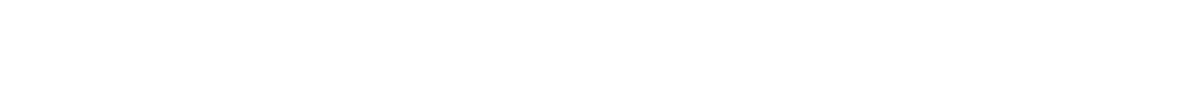
# YOUR STUDIES LAST YEAR: IN 2016/2017

**T**-Not in education and I have never attended a French higher education establishment

**U**-Not in education but I have already attended a French higher education establishment

**A**-Secondary education **B**-BTS **C**-IUT **D**-CPGE **E**-Engineering school **M**-ESPE   
**G**-Distance learning **H**-University **I**-Management school **K**- Other French listed establishment

**Q**-Foreign secondary education establishment **R**-Foreign higher education establishment **S**-Other establishment or pathway



Establishment name

Department or Country

**WHAT WAS THE LAST DIPLOMA YOU OBTAINED?**

**900**- No higher education diploma **988**- A secondary education diploma from a foreign establishment

**989**-diploma of foreign establishment superior

Department or Country

Academic year

**ARE YOU ENROLLED IN PARALLEL AT ANOTHER EDUCATIONAL ESTABLISHMENT IN**

**THE CURRENT YEAR?**

NO

Type of establishment:

YES

If YES, specify:

**00**-University

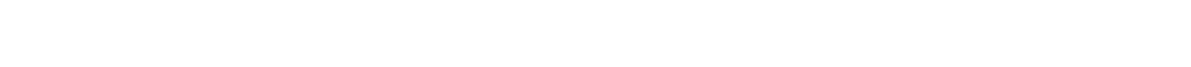
**01**-BTS **02**-CPGE

**05**-Private higher education establishment

**03**-Business, management school **04**-Engineering school

**06**- Art/Culture higher education establishment

**18**-Paramedical or social training or **10**-Foreign higher education establishment **11**-ENS **13**-Architecture school **17**-CNED **15**-Other, specify ……………………………………………………



Establishment name

**FOR WHAT DIPLOMA(S) DO YOU WANT TO ENROL?**

## Main enrolment

Diploma applied for Year of the diploma course



Number of enrolments: within the cycle for this diploma for this year (stage)  
 Scholarship: **01**-French government scholarship **06**-Public service scholarship

**07**-Midwife scholarship **08**-Annual emergency grant

**12**-CROUS definitive social criteria scholarship **13**- CROUS conditional social criteria scholarship

Scholarship holder number



Is this distance learning training (EAD)?

Category

NO YES **3-** From France?

If YES

**4-** From abroad?

## Additional enrolment 1

Diploma applied for Year of the diploma course



**3-** From France?

**4-** From abroad?

Is this distance learning training (EAD)? NO YES If YES

## Additional enrolment 2

Diploma applied for Year of the diploma course

 Is this distance learning training (EAD)? NO YES If YES

**3-** From France?

**4-** From abroad?



**WHAT IS YOUR SITUATION IN RELATION TO SOCIAL SECURITY?**

## Affiliation to the student system (parents’ system)

Employees and equivalent (private, public service, employee or farm operator, contracted medical profession, CCI of Paris, indemnified job seeker, Bank of France, magistrates, local authority worker, caisse dépôt et consignation, artists and authors) OR foreign student outside the EU, the EEA and Switzerland

Craftsmen, traders, liberal professions, EDF, GDF (Engie), RATP, Mines, service personnel, notary’s employees and clerks, Senate, Religious personnel

Merchant navy, National Assembly, Autonomous port of Bordeaux, national theatres, Comédie française



SNCF personal insurance scheme  
Other system

## Exemption from affiliation to the student system if you are in one of the following situations

You have already paid your social security contributions in   
 another establishment (2017/18)

Your spouse or cohabitee has a permanent job

You come from a member country of the EU, the EEA,

Switzerland or Quebec

Your parents are French workers for an international organisation

You are affiliated to a system other than the student system (employee system, etc.)

**Special cases:** Political refugee (OFPRA card) Extension for students over 28



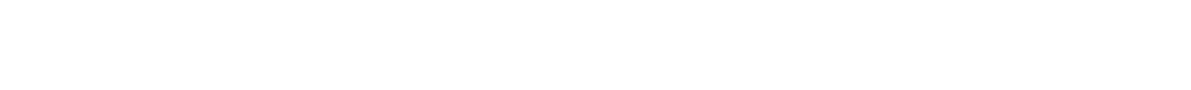
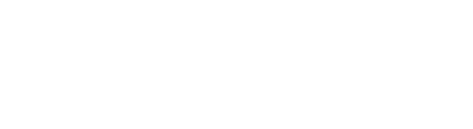
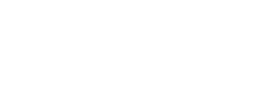
## Your social security No.

**If you will be under 20 on 31 August 2018 and your parents are part of the employees or equivalent system, you are Insured Personally.**

Please fill in the following fields. Information about the parent insurer:

Last name First name Social security No.

**Payment Centre**: The student mutual insurance organisations act as social security centre by convention. What payment centre do you choose for payment of social benefits? (obligatory for the student system)



**601**-La Mutuelle Des Etudiants (LMDE)

**617**-La Mutuelle Générale des Etudiants de l’Est (MGEL) – EMEVIA network

**OPTIONAL FEES**

Sport *(free for 2017 successful bac. students and scholarship holders)*

Culture card *(free for 2017 successful bac. students and scholarship) )holders)*

**DO NOT WRITE ANYTHING IN THIS BOX – RESERVED FOR THE ADMINISTRATION**

**Payment method**

**NU**- Cash **CB**- Bank cheque

**CE**- Bank card **DT**- TOM bank cheque

**CT**- Credit card **CBE**- Foreign bank cheque (in euros) payable abroad

**FAC**- Invoice **CBF**- Foreign bank cheque (in euros) payable in France

**DI**- Various **MC**- Postal money order

**NUL**- Zero payment invoice

Reason for incomplete application:

## I, the undersigned, certify on my honour the accuracy of the information provided above

Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student signature:

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Students under 18,

Signature of the parents:

The Data Protection Act No.78-17 of 03/01/1978 applies to this application form. It entitles you to access and amend your personal data. Requests in this respect should be sent to the Chancellor of the University.

N.B. Enrolment may be cancelled and tuition fees refunded if a written request, setting out the reasons for withdrawal, is submitted before the start of the course.

Providing false or inaccurate information on a document issued by a public authority in order to establish a right, an identity or a capacity or to obtain authorisation is punishable by up to five years’ imprisonment and a fine of EUR 75,000. (Article 441-2 of the Penal Code).

The information collected by the University of Strasbourg is processed electronically for the administrative and academic management of students, to establish statistics for the Ministry of Education and the local education authority, and to organise surveys about students’ living conditions by the Observatoire de la vie étudiante (observatory for student life). Social security organisations, student mutual insurance organisations and the CROUS student service centre also receive the information they require for their work. The information collected at the time of enrolment will also be used to produce the multiservice card. This card is used for admission to CROUS restaurants, libraries, including the BNU, sports facilities, buses and trams in Strasbourg Eurométropole, photocopiers and printers, and vending machines using the IZLY payment method managed by the BPCE.

This information will also be used to create your account for access to the University of Strasbourg’s E.N.T.(digital workspace).

In accordance with Article 39 of the Data Protection Act, you are entitled to access and amend your personal information. If you wish to exercise this right and receive a copy of the information about you, please contact the student affairs department.