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# INCOMING STUDENT APPLICATION FORM

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COURSE OF STUDY      ART  DESIGN

AUTUMNSEMESTER            SEPTEMBER - JANUARY

SPRINGSEMESTER            JANUARY - JUNE

ARRIVAL DATE :      DEPARTURE DATE :

FAMILY NAME :      DATE OF BIRTH :

FIRST NAME :      PLACE OF BIRTH :

GENDER    F     M       NATIONALITY :

E-MAIL ADDRESS :      PASSPORT NUMBER :

ADDRESS :      PHONE NUMBER :

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SENDING INSTITUTION      NAME :

ADDRESS :

ERASMUS CODE :

EXCHANGE COORDINATOR NAME :

E-MAIL ADDRESS :

PHONE NUMBER :

DEGREE PROGRAM :

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CONTACT      INTERNATIONAL EXCHANGE COORDINATOR  
EMMANUEL MONNIER  
ÉCOLE NATIONALE SUPERIEURE D'ART  
3 RUE MICHELET, BP 22566  
21025 DIJON CEDEX, FRANCE  
[INTERNATIONAL.STUDIES@ENSA-DIJON.FR](mailto:INTERNATIONAL.STUDIES@ENSA-DIJON.FR)  
+33 3 80 30 23 85

**N.B : THE APPLICATION FORM MUST BE SENT BY E-MAIL WITH 2 ID PHOTOGRAPHS.**