



EXCHANGE STUDENT APPLICATION FORM

☐ Mrs ☐ Mr

FAMILY NAME: _____

FIRST NAME: _____

Please, insert your
photo

STUDENT' S PERSONAL DATA

Date of Birth (dd/mm/yy)

Place & Country

Nationality

Email

Correspondence address

Telephone

Address in home country

Contact in case of emergency (name-
phone number- Email address)

HOME INSTITUTION

Name of the Home University

Address

Name of your coordinator

Telephone

Email

Facebook Contact

STUDY PERIOD (Please, tick the relevant box)

Fall Semester

Spring Semester

Full Year

Double Degree



La Rochelle Business School France

STUDENT DATA REMINDER

Family Name: _____ First Name: _____

La Rochelle Business School offers to exchange students the opportunity to join one of its study Programme. Students need to choose one Programme according to their field and level of study and their language skills.

Please, choose one of the Programmes below by ticking the relevant box. Only one Programme and one track can be selected.

If you wish to contact Coordinators of the Programmes for more information, please contact:

incomings@esc-larochelle.fr.

<input type="checkbox"/>	FRENCH LANGUAGE COURSES ONLY		
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UNDERGRADUATE BACHELOR PROGRAMMES			
<i>Name of the Programme</i>		<i>Language track</i>	
<input type="checkbox"/>	Bachelor in Business - 1 st year	<input type="checkbox"/>	French track only
<input type="checkbox"/>	Bachelor in Business - 2 nd year	<input type="checkbox"/>	French track only
<input type="checkbox"/>	Bachelor in Business - 3 rd year	<input type="checkbox"/>	French track only
<input type="checkbox"/>	BBA - Bachelor in international Business - 2 nd year	<input type="checkbox"/>	French track
<input type="checkbox"/>	BBA - Bachelor in international Business – 4 th year	<input type="checkbox"/>	English track
<input type="checkbox"/>	BBA - Bachelor in international Business – 4 th year	<input type="checkbox"/>	French track
<input type="checkbox"/>	BBA - Bachelor in international Business – 4 th year	<input type="checkbox"/>	English track
<input type="checkbox"/>	Bachelor in Tourism Management - 1 st year	<input type="checkbox"/>	French track
<input type="checkbox"/>	Bachelor in Tourism Management - 2 nd year	<input type="checkbox"/>	English track
<input type="checkbox"/>	Bachelor in Tourism Management - 2 nd year	<input type="checkbox"/>	French track
<input type="checkbox"/>	Bachelor in Tourism Management - 2 nd year	<input type="checkbox"/>	English track*
<input type="checkbox"/>	Bachelor in Tourism Management - 3 rd year	<input type="checkbox"/>	French track
<input type="checkbox"/>	Bachelor in Tourism Management - 3 rd year	<input type="checkbox"/>	English track
<i>* Only for Spring Semester</i>			
<input type="checkbox"/>	ESC1 – Bachelor Last Year	<input type="checkbox"/>	French track
<input type="checkbox"/>	ESC1 – Bachelor Last Year	<input type="checkbox"/>	English track

POSTGRADUATE MASTER PROGRAMMES			
<i>Name of the Programme</i>		<i>Language track</i>	
<input type="checkbox"/>	Master in Management - 1 st year (ESC2)	<input type="checkbox"/>	French track
<input type="checkbox"/>	Master in Management - 1 st year (ESC2)	<input type="checkbox"/>	English track
<input type="checkbox"/>	Master in Management – 2nd year (ESC3)	<input type="checkbox"/>	French track
<input type="checkbox"/>	Master in Management – 2nd year (ESC3)	<input type="checkbox"/>	English track
<input type="checkbox"/>	→ Choices of specialization	<input type="checkbox"/>	French track
<input type="checkbox"/>	→ Choices of specialization	<input type="checkbox"/>	English track

**STUDENT DATA REMINDER**

Family Name: _____ First Name: _____

LANGUAGE COMPETENCE

Native Language

Language of instruction at home institution
(if different)

TOEFL score

Level of French

PREVIOUS AND CURRENT STUDYDiploma for which you are currently
studyingNumber of higher education study years
prior to departure

Did you already study abroad?

If yes, when and where?

HOME INSTITUTION'S APPROVAL

We approve and support this application. We confirm that the applicant has the academic and linguistic competencies necessary for this exchange.

Date, name & signature of the International
Coordinator

Student signature

Date



Please, refer to next page for important information.

Check list of documents (please tick boxes!)

- ☐ 1 passport photo (JPEG format)
- ☐ Copy of identity card or passport
- ☐ Learning Agreement (overview of courses to be taken)
- ☐ Transcripts of results - Higher education study
- ☐ Curriculum Vitae
- ☐ **Non-European Students only:** Bank statement, Grant statement or parental letter indicating sufficient funds (equivalent to € 450 per month)

HEALTH INSURANCE IMPORTANT INFORMATION

- ☐ **For European Students:** a copy of your European Health Insurance Card (EHIC)
- ☐ **Non-European Students** are required to purchase mandatory French health insurance (about 215 € - in 2015-2016) upon arrival at La Rochelle Business School
- ➔ **Please note that it is mandatory for all non-European students, between 20 and 28 years old, to buy the French health insurance that will cover them in France, even if they already bought an insurance before departure.**
- ➔ Students will be requested to make this payment by credit card or cash upon their arrival.

Nomination deadlines by your Home university:

- **FALL semester 2017: May 1st, 2017**
- **SPRING semester 2018: November 1st, 2017**

Application deadlines:

- **FALL semester 2017: May 30th, 2017**
- **SPRING semester 2018: November 30th, 2017**

Please, send the application documents by e-mail to:

incomings@esc-larochelle.fr