photo

ENROLMENT FORM

Please complete in black upper case letters

Payment for training sessions is **exclusively by bank transfer**, or no later than one month before the beginning of the training session..

THE EXACT TITLE OF THE COURSE YOU WOULD LIKE TO TAKE:...

DATES OF THE COURSE: from................................. to......................................

IDENTITY	HIGHER EDUCATION	PROFESSIONNAL ACTIVITY
SURNAME: .... FORENAME:.....................................	NUMBER OF YEARS OF STUDIES: ....years SUBJECT:	DATE APPOINDED AS A JUDGE OR PROSECU-TOR (or other) : ....
DATE OF BIRTH:	.... DIPLOMA AWARDED (indicate the highest diploma awarded):	CURRENT POSITION: ....
NATIONALITY:..	.... PLACE AWARDED:	COUNTRY OF WORK : ....
TITLE: MS ☐ MR ☐	.... DATE AWARDED :	

IDENTITY

HOME ADDRESS (postal address):..
....
....
TELEPHONE: ....E-MAIL: ....

PROFESSIONAL ADDRESS: ....
....
PROFESSIONAL TELEPHONE : ....PROFESSIONAL E-MAIL : ....

KNOWLEDGE OF FRENCH

KNOWLEDGE OF FRENCH: yes ☐   no ☐

Il yes, where did you learn Frenck (name and location of institution):..
....

LEVEL ACQUIRED :

Reading:	GOOD ☐	AVERAGE ☐	POOR ☐
Writing:	GOOD ☐	AVERAGE ☐	POOR ☐
Speaking:	GOOD ☐	AVERAGE ☐	POOR ☐

MOTIVATION

WHY DO YOU WANT TO DO THIS COURSE AT THE ENM:

HAVE YOU ALREADY TAKEN PART IN A COURSE AT THE ENM (if so, which one ?)

....

FINANCING

TRAINING COSTS PAID BY:

☐ The trainee (Indicate name and address):

☐ The embassy via Campus France

☐ The embassy via other (Indicate name and address):

☐ Other (Indicate name and address):

I hereby certify that the above information is correct and complete, and that if my application should be taken into consideration, I undertake to comply with the general rules of tuition at the ENM. .

in..on... SIGNATURE OF THE APPLICANT:

STAMP OF THE COMPETENT LINE AUTHORITY AUTHORISING THE APPLICANT TO FOLLOW THIS COURSE:

NAME OF SIGNATORY:..

CAPACITY OF SIGNATORY:...

in..on.....................................

BOX RESERVED FOR CULTURAL ATTACHE, HEAD OF MISSION OR LIAISON JUDGE

OPINION ON THE APPLICATION:

In the light of the position held by the applicant, the body for which they work and the course requested, I hereby give the following opinion on this application:

VERY FAVOURABLE ☐   FAVOURABLE ☐   UNFAVOURABLE ☐

THE CANDIDATE'S LEVEL IN FRENCH IS:

Reading:	GOOD ☐	AVERAGE ☐	POOR ☐
Writing:	GOOD ☐	AVERAGE ☐	POOR ☐
Speaking:	GOOD ☐	AVERAGE ☐	POOR ☐

REMARKS:

DATE :
SIGNATURE :

Any incomplete forms will be returned