



La Salle EMCI

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Photo

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PERSONAL INFORMATION			
Last Name (family name)		First Name	
Address			
City	Province/State	Country	Postcode / Zipcode
Telephone	E-mail Address		Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth		Country of Birth	Nationality
Name of Emergency Contact	Relationship to Applicant	Telephone	E-mail Address
Native Language			

PERIOD
<input type="radio"/> Fall Semester 2024

EDUCATION INFORMATION	
Current programme :	
Name of University/Institution :	Country :
From Month/Year:	
To Month/Year:	
Year Completed	Language of Instruction

INTERNSHIPS	
Name of company, country	Tasks

FRENCH LANGUAGE PROFICIENCY (if not the native language)	
Full institution name	Address
Name of Test	Date
	Score
If you haven't taken any English proficiency exams, please provide a proof of your level according to the European assessment grid from your language teacher :	
<input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2	
ENGLISH LANGUAGE PROFICIENCY (if not the native language)	
Full institution name	Address

Name of Test	Date
	Score
If you haven't taken any English proficiency exams, please provide a proof of your level according to the European assessment grid from your language teacher :	
<input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> C1 <input type="checkbox"/> C2	

	Poor	Average	Good	Very good	Excellent
Analysis and reflection capacity					
Involvement in company (internship)					
Proficiency in English					
Proficiency in second foreign language					
Motivation for international trade					
Motivation for further studies					

REFERENCES OF THE HEAD OF STUDIES

On the applicant's abilities to carry out further studies:

- Very favorable** **Favorable** **Unfavorable**

Comments :

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Date :

Name,, signature – Stamp

FREEDOM OF INFORMATION - The information contained on this form and other documents and materials used to support the admission and registration process is collected for the purpose of making admission and registration decisions, for informing students of registration matters, for communicating additional information about college-wide activities and for enabling other HECI Saint-Louis departments to contact applicants and students. If you have any questions about the collection and/or use of this information, please contact Sandrine PINET, HECI Saint-Louis, 10, rue Franklin, 42028 Saint-Etienne Cedex 1, France. Phone: +33 4 77 43 54 01. Fax : +33 4 77 32 53 14

DECLARATION (Application will be returned if not signed below) – I confirm that to the best of my knowledge and belief all the information I have given on this form is true, complete and accurate. I have enclosed the required documents (certificates, supporting documents, etc). I am aware that intentionally or negligently giving false information constitutes an administrative offence and may lead to exclusion from the admissions procedure or – if discovered at a later date – to the cancellation of my admission. I confirm that I have read the admissions information. I agree that HECI Saint-Louis may verify the information provided by contacting any secondary or post-secondary institutions.

For further information, please contact : Florence GALLEGO HISS, f.gallegohiss@lasalle42.fr / Ruth Brenchley, fr.brenchley@lasalle42.fr

La Salle EMCI - 10 rue Franklin - F- 42000 Saint-Etienne - Phone: +33 4 77 43 54 30 - Fax : +33 4 77 32 53 14

SIGNATURE

Date:

Signature :

ATTACHED DOCUMENTS

- Transcripts of 1st years of Undergraduate program
- Copy of Health Insurance
- Copy of ID Card or passport
- 2 photos
- Letter of application and CV
- English Language Test