

**Application Form for a studio in a CROUS student residence 2018/2019**

***For EHESS international students ONLY***

***EHESS has at its disposal 25 studios in CROUS residences, for its international students only.*** *Those studios are located in three different Parisian sites: “Francis de Croisset residence”, “Lepaute Residence” and “Fontaine au Roi residence”.*

*Applications are selected for:*

*- the full academic year (from September 1st to June 30th)*

*- the first semester (from September 1st to February 28th)*

*- the second semester (from March 1st to June 30th )*

please fill in the following fields in digital version

**CIVIL STATUS AND CONTACT DETAILS:**

Last Name:

First Name:

Nationality:

Date of Birth:

Address of residence abroad:

Address of residence in France:

Phone number (landline - with country code):

Mobile number (with country code):

Email address:

**IMMIGRATION**

*For citizens of European countries:*

*As a student and EU citizen, from a country member of the European Economic area, or as a citizen from Switzerland, you don’t need to apply for a residence permit. Nevertheless, you need to have a valid ID card or passport.*

*For citizens of non-European countries:*

* What visa do you have/will you have?
* Visa valid from DD/MM/ YYYY to DD/MM/YYYY
* Do you have a French residence permit?

* Residence permit valid from DD/MM/ YYYY to DD/MM/YYYY

**EDUCATION**

1/ 2018/2019 academic year:

* Have you completed your enrollment at EHESS for 2018/2019?
* If yes, please indicate your student ID number:
* If no, please indicate when you will apply:
* Are you an exchange program student?

[ ]  Yes [ ]  No

* Will you be enrolled as a master student?

[ ]  Yes [ ]  No

* Will you be enrolled as a PhD student?

[ ]  Yes [ ]  No

* Are you enrolled in a joint supervision program?

[ ]  Yes [ ]  No

* Have you enrolled in another School or University?

[ ]  Yes [ ]  No

* As appropriate, in which EHESS program have you / will you be enrolled in 2018/2019?
* To which research center are you associated with?
* What is the name of your academic advisor / of your thesis advisor / or of the professor / researcher inviting you?

2/ Academic background:

* In which School or University did you enroll in 2017/2018?
* Have you ever studied at EHESS? If yes, please indicate the program and the academic year

[ ]  Yes [ ]  No

**FINANCIAL SUPPORT FOR THE ACADEMIC YEAR 2018/2019**

***Do you have a scholarship?***

[ ]  Yes [ ]  No

- amount per month (net):

- dates of validity: from DD/MM/ YYYY to DD/MM/YYYY

- name of scholarship:

- organization / institution:

***Will you have parental support during your stay?***

[ ]  Yes [ ]  No

-amount per month:

- duration of support: from DD/MM/ YYYY to DD/MM/YYYY

***Do you have an employment?***

[ ]  Yes [ ]  No

- salary per month (gross amount) :

- duration of the contract (**dates from DD/MM/ YYYY to DD/MM/YYYY)**

- employer’s details:

**REGARDING THE ACCOMODATION:**

* What is the maximum you may spend on accommodation per month (without considering the potential CAF housing assistance benefit)
* Do you have a guarantor?

 *The owner or lessor generally requires a guarantor. The guarantor is committed to pay the rent and the charges, if the tenant is unable to meet its obligations. The guarantor must be solvent, as he/she needs to show by sufficient income that he/she is able to take over this responsibility.*

* Have you already applied to other means of accommodation?

If yes, with which organization/institution?

* Have you ever lived in France?

[ ]  Yes [ ]  No

* If yes, where (please indicate if it was in a student residence) ?
* If yes, from when to when?
* **Dates of your stay in France in 2018/2019**: from DD/MM/ YYYY to DD/MM/YYYY
* **Requested dates of arrival and leaving from Crous housing in 2018/2019:** from DD/MM/ YYYY to DD/MM/YYYY

**PARTICULAR REQUESTS AND OBSERVATIONS:**

**Please imperatively attach the following documents to this form:**

1. Copy of your passport or ID card
2. Copy of your visa, entry stamp, OFII stamp and/or residence permit, according to your situation *(if available at the time of application)*
3. Copy of a document proving your enrollment at EHESS (student ID card, registration receipt or letter of acceptance for the requested academic year)
4. Copy of your birth certificate
5. Copy of your certificate of scholarship or grant, certificate of employment, and/or certification of your parental support, as well as any other document proving your financial resources
6. If you have already applied for CAF benefit, copy of the CAF certificate

Any incomplete application will not be considered. Additional documentation may be requested.

Your complete file has to be sent by email (PDF or word document), with your name (lastname\_firstname), to the following address: emeline.grondin@ehess.fr

I, the undersigned *<last name, first name>,* certifies the accuracy of the information given above.

**Date and signature:**