



APPLICATION FORM FOR THE MASTER IN - WBI GRANTS

GRANT APPLICATION

In accordance with European data protection regulations, the information in this file is retained for the sole purpose of processing the application for potential selection.

Candidate Information

Country of origin	Sector of study	Intended programme	Host institution		
	Choose an item				
		Is the study programme			
		partially or entirely			
		taught in French?			
		Choose an item			
Admission file reference number at the host institution:					
This reference is mandatory when submitting the Master IN – WBI grant application.					
Last Name(s):					
First Name(s):					
Place and date of birth:	Date				
Nationality:					
Marital status and family	responsibilities:				
Gender (M-F-Prefer not t	o answer):				
Occupation or position (if	frelevant):				
Current residency:					
Permanent address:					
Email address:					
Mobile phone:					





Study Abroad Grant(s) Obtained Previously

Funding organisation	Study programme	Country where studies	Duration of the grant	
		were conducted		
1				
2				
3				

Have you applied for other grant(s) for the concerned academic year? If yes, with which organisation(s)?

•••

Higher Education Background

Current degree: Choose an item

Institution(s)	Programme title	Legal duration and credits	Year of start and year of end	Obtained distinctions	GPA
		creatts	enu		
			•••		





Language Proficiency

Language of the targeted study	Choose an item
programme	
Type of language test taken*	
Date of the test (dd/mm/yy)	Enter a date
Writing	
Reading	
Listening	
Speaking	

* Please attach a copy of your official language test results.





DECLARATION OF THE CANDIDATE

I, the undersigned ...

- declare that I have submitted an enrolment file to the host higher education institution, with the reference: ...
- declare that I am aware of the conditions for financial support and commit to strictly adhere to them;
- declare that I have attached all necessary documents for the application (see application guide)
- declare on my word of honour that the provided information is sincere and true.

Done at location, on date

(Signature of the candidate)