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| Passport size photoNEEMRANA MUSIC FOUNDATION and EMBASSY OF FRANCE IN INDIA  Scholarship application form Please read the guidelines for application before filling the form! |
| Type your information above the black line with font size 10 |
|  |
| Do not alter layout of pages when completing the form |
|  |
|  |
| **Personal details** |
|  |  |  |  |  |
|  | Surname |  | First name(s) |  |
|  |  |  |  |  |
|  | Previous surname (if married) |  | Date of Birth (dd / mm / yyyy) |  |
|  |  |  |  |  |
|  | Gender |  | Place of Birth |  |
|  |  |  |  |  |
|  | Nationality |  | Highest academic degree obtained |  |
|  |
| **Current field of study / profession** |
|  |  |  |  |  |
|  | Degree / Company |  | Specialisation subject / professional designation |  |
|  |  |  |  |  |
|  | Period for which Scholarship is required (dd/mm/yy-dd/mm/yy) |  | Number of Months |  |
|  |
| **Current address** |
|  |  |  |
|  | Street, P.O. Box |  |
|  |  |  |
|  | City/town and Postal code |  |
|  |  |  |  |  |  |  |
|  | Email |  | Mobile |  | Tel |  |
|  |  |  |  |  |
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| **Contact person and host institution in France** |
|  |  |  |  |  |
|  | First Name and Surname |  |  |  |
|  |  |  |
|  | University/Institution |  |
|  |  |  |
|  | Department/Institute |  |
|  |  |  |
|  | Street/P.O. Box |  |
|  |  |  |  |  |
|  | Postal code |  | City E-mail Tel. |  |

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| **Application status** |
|  | Do you have a confirmation of your admission in the French institution? |  |
|  |  | Confirmed |  | Awaited |  |
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| **Other application(s)** |
|  | Are you applying for a scholarship to any other institution? |  |
|  |  | Yes |  | No |  |
|  |  |  |
|  | If so, which? |  |
|  |  |  |
|  | Have you previously been awarded a French Embassy Scholarship? |  |
|  |  | Yes |  | No | Year |  |  |
|  |  | When? |  |  |

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| **Previous or present study and stays abroad (including France) of at least two months' duration** |
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| --- | --- | --- | --- |
| Period(mm.yyyy) | Institution | City, Country | Financed by |
|  |  |  |  |

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| **French language proficiency** |
| □ NoneDELF / DALF examination A1 □ A2 □ B1 □ B2 □ C1 □ C2 □ |
| If not DELF / DALF, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(school / coaching classes / self-taught or any other) |

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| **Where did you hear about this scholarship?** |
| Professor □ Peer / Senior □ Campus France □ Alliance française □ |
| If other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Statement of Purpose (minimum one page, maximum two pages in Times New Roman - 12)**Please highlight the reasons for choosing France and the institution where you will be studying. Please also explain why you would be a worthy candidate for the scholarship. |

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| I hereby declare that the above statements are true to my knowledge and belief; that I am of sound health and not physically handicapped in a way that would prevent me from carrying out my project in France.The French Embassy has my permission to electronically store my personal data, which is required for my scholarship application and my possible stay in France. If a scholarship is awarded to me, my name and institution of origin may be included in lists published by the French Embassy in India. |
|  |  |  |  |  |
|  | Place & Date |  | Signature |  |