

## CIVIL STATUS

☐ Mrs ☐ Mr

Last name: .....

First name: .....

Birthdate: \_ \_ / \_ \_ / \_ \_ \_ \_  
day / month / year

Birthplace: .....

Native country: .....

Nationality: .....

## CONTACT

Phone: .....

Email: .....

Address: .....

Post code: .....

City: .....

Country: .....

Family's / friend's contact:

Last name: .....

First name: .....

Phone: .....

Email: .....

## UNIVERSITY STUDIES

Year of graduation from high school: \_ \_ \_ \_

Have you ever taken university-level courses?

☐ yes ☐ no

If yes, fill out this part:

Name of the University: .....

City: .....

Country: .....

Major: .....

Starting date: \_ \_ / \_ \_ / \_ \_ \_ \_

Ending date: \_ \_ / \_ \_ / \_ \_ \_ \_

Number of years completed: .....

Year of graduation: \_ \_ \_ \_

What is your academic/professional project?

.....

.....

.....

## KNOWLEDGE OF FRENCH

For how long have you been studying French?

☐ .....hours ☐ .....month(s)

Where did you learn French?

☐ High school ☐ University

☐ Other: .....

What is your French level?

☐ Beginner ☐ Intermediate

☐ Advanced Intermediate ☐ Advanced

Indicate your CECRL level, if you know it:

☐ A1.1 ☐ A1 ☐ A2 ☐ B1 ☐ B2 ☐ C1 ☐ C2

Have you received any certificate or diploma in French?

☐ TCF ☐ DELF ☐ DALF ☐ DUEF

Level: .....

*Please, send a copy of your French Language Certificate*

## How did you know about ILCF-Lyon?

☐ You are an ILCF-Lyon former student

☐ Internet

☐ Social networks

☐ An acquaintance (family, friend, etc.)

☐ Home university; please specify the name: .....

☐ Agency; please specify the name: .....

☐ Other; please specify: .....

.....

.....

.....

PROGRAMS	DURATION	TUITION	DEPOSIT deducted from the total amount
<b>Semi-intensive programme - 16 hours per week</b>			
<input type="checkbox"/> 1 <sup>st</sup> semester <input type="checkbox"/> 2 <sup>nd</sup> semester	200 hours [per semester]	1 806 € [per semester]	370 €
<input type="checkbox"/> 1 additional consecutive semester	200 hours	1 577 €	370 €
<input type="checkbox"/> 1 academic year [from October 4, 2021 to May 25, 2022]	400 hours	3 171 €	630 €
<input type="checkbox"/> 1 additional consecutive academic year	400 hours	3 064 €	630 €
<b>Intensive programme - 20 hours per week</b>			
<input type="checkbox"/> 1 <sup>st</sup> semester [from October 4, 2021 to January 26, 2022] <input type="checkbox"/> 2 <sup>nd</sup> semester [from February 3 to May 25, 2022]	248 hours [per semester]	2 379 € [per semester]	370 €
<input type="checkbox"/> 1 additional consecutive semester	248 hours	2 158 €	370 €
<input type="checkbox"/> 1 academic year [from October 4, 2021 to May 25, 2022]	496 hours	4 296 €	630 €
<input type="checkbox"/> 1 additional consecutive academic year	496 hours	4 170 €	630 €
<b>Monthly programme - 16 hours per week</b>			
<input type="checkbox"/> February <input type="checkbox"/> June	64 hours	718 €	250 €
<b>Specific French programme</b>			
<input type="checkbox"/> 1 course	24 hours	360 €	
<b>Summer intensive programme - 20 hours per week</b>			
<input type="checkbox"/> 1 month <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September	80 hours	785 €	200 €
<input type="checkbox"/> 2 months <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September	160 hours	1 493 €	400 €
<input type="checkbox"/> 3 months <input type="checkbox"/> July <input type="checkbox"/> August <input type="checkbox"/> September	240 hours	2 168 €	600 €

## PAYMENT

Total of deposit:  
.....€

For my registration, I will send the deposit (deducted from the total amount), relevant to my pre-enrolment :

- ☐ by credit card on the website [www.ilcf.net](http://www.ilcf.net) | «enrolments»  
☐ by check paid to «AFICL»  
☐ by credit transfer:

Banque de Savoie (Lyon Part-Dieu) - 21 avenue de Saxe - 69006 Lyon - France  
 Compte: AFICL - Numéro de compte: 00047600516 Clé 43 - Code banque: 10548 - Code guichet: 00062  
 Code BIC: BSAVFR2C - Code IBAN: FR76 10548 00062 0004760051 643

## ACCOMMODATION

- ☐ I would like the housing service of the Lyon Catholic University to help me find a place to stay.  
☐ I will find my housing on my own.

## COMPLETION OF REGISTRATION

- ☐ I fully understand and accept the general terms and conditions of the ILCF Lyon available on the website [www.ilcf.net](http://www.ilcf.net)  
 (see pages 12 «Admission procedure» for the required documentation)

- ☐ I have included the enrolment form with the payment or proof of the payment:

by mail: [ilcf@univ-catholyon.fr](mailto:ilcf@univ-catholyon.fr)

by post: ILCF Lyon - UCLY - 23 place Carnot 69286 Lyon Cedex 02 - France

Date of my arrival in Lyon: \_\_ / \_\_ / \_\_ \_\_  
 Day / Month / Year

DATE: .....

SIGNATURE: