Application Form_BIP_Migration Studies

I, the undersigned, _____,

a student at the Faculty of _____ year _____,

enrolled in the Master's Programme_____, residing in the city of_____, Street _____, No._____,

Bl._____, Ap._____, district_____, county_____,

CNP (Personal Identification Number)_____

hereby request approval to participate in the selection process for the **Blended Intensive Programme (BIP): *Migration Studies***, organized within the partnership with **Université de Picardie Jules Verne, Amiens, France**, for the period **2 October 2026 – 11 December 2026**, with **English** as the language of instruction.

HOST UNIVERSITY:

Université de Picardie Jules Verne, Amiens, France

Would you be willing to undertake the mobility as a "Zero-Grant" participant? ☐ DA ☐ NU

Contact Details:

Telephone _____

E-mail:_____

Student's Signature_____

Date_____