



Haute Ecole Libre de Bruxelles – Ilya Prigogine  
Code Erasmus: B BRUXEL 85

Institut Supérieur de Promotion Sociale Libre de Bruxelles Ilya Prigogine  
Code Erasmus: B BRUXEL 94

### International Relations Office

Director : Michael ROBERT

Student exchange coordinator : Etienne Coppin

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## APPLICATION FORM for INCOMING STUDENTS

Academic year 2019/2020

**To be filled in electronically** with Adobe Acrobat Reader (free) (File name: Family Name AF.pdf, family name in capitals, no space, no accents) and to be sent to: [etienne.coppin@helb-prigogine.be](mailto:etienne.coppin@helb-prigogine.be) . Please enclose : Your Transcript of Records (last one available), a personal photo (ID size - jpg) and a photocopy of your identity card

### Personal Data<sup>1</sup>

<b>Family Name</b>	
<b>First Name</b>	
<b>Field of study</b>	

<b>Date of Birth</b>	
<b>Gender</b>	
<b>Nationality</b>	
<b>Current Address</b>	
<b>Phone number</b>	
<b>Your institutional email address</b>	
<b>Your personal email address</b>	
<b>National Health Number</b> (only for students in paramedical studies)	
<b>Degree which you are currently studying</b> (study duration)	
<b>Year of study during your Erasmus stay</b> (e. g. Bac.3)	
<b>Person(s) to contact in case of emergency:</b> Name and phone number	
<b>Any disability/special needs, if any please describe</b>	

<sup>1</sup> In compliance with GDPR, your personal data will be treated confidentially

Home Institution

<b>Home Institution's Erasmus ID CODE</b>	
<b>Institutional International Coordinator's name</b>	
<b>Institutional International Coordinator's phone</b>	
<b>Institutional International Coordinator's email</b>	
<b>Study period</b>	
<b>Duration of stay in months</b>	
<b>Intended Month of arrival</b>	
<b>Intended Month of departure</b>	

Language competences<sup>2</sup>

Language	Reading	Writing	Speaking

I certify that all the information provided in this Application Form is correct and complete to the best of my knowledge.

Insert your signature (use Adobe Acrobat Reader)

Date of signature (DD/MM/YYYY)

If any question, please contact : [international@helb-prigogine.be](mailto:international@helb-prigogine.be).

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2 Rate your language skills as "excellent", "good" or "poor". Include all languages in which you have some competence. Also indicate your native language.