



## ADDRESS

Permanent Address (in CAPITAL LETTERS)

Postal Code

City

Country

person to contact in case of emergency (Last name – first name)

Phone number of the person to contact in case of emergency

### Type of housing for current year

- 1 – university residence     2 – Approved youth hotel     3 – Social housing HLM/CROUS     4 – Parents' address  
 5 – Personal lodgings (excluding student room)     6 – student room     7 – other

Address for the current year (In CAPITAL LETTERS)

Postal code

City

Country

Cell phone

Phone (land line)

e.mail

## ANNUAL ADMINISTRATIVE REGISTRATION

Have you interrupted your studies for a period exceeding 2 years since obtaining the Baccalaureat or an equivalent diploma?

yes     No    If yes, indicate the years

is the return to your studies financed by a public or private agency     yes     no

RESERVED FOR THE ADMINISTRATION			
REGIME			
<input type="checkbox"/> 1 Initial training	<input type="checkbox"/> 2 On going training financed by a private or public agency		
<input type="checkbox"/> 3 return to studies not financed by an agency	<input type="checkbox"/> 4 training under apprenticeship contract	<input type="checkbox"/> 5 Professional contract	
STATUS			
<input type="checkbox"/> 01 student	<input type="checkbox"/> 03 intern on-going training	<input type="checkbox"/> 05 student apprentice	<input type="checkbox"/> 08 professional contract
<input type="checkbox"/> 02 auditor	<input type="checkbox"/> CU University certificate	<input type="checkbox"/> 06 housed learner	

### Socio-professional category

Of the student (supporting documents required)

Do you have a professional activity or are you seeking employment:     yes     No  
Indicate the socio professional category:    Code

### Activity

- K – Civil servant intern or military     L – EAP employment as future teacher     I – Intern in medical medicine  
 00 – other activity

### Work time

- A – Full time covering university year  
 B – Part-time (+ 150 hours per quarter)  
 C – Part-Time (- 150 hours per quarter)  
 D – full time or part-time not covering university year  
 E – job seeker     with allocation     without allocation
- } from 09/01/2018 to 08/31/2019

**SOCIO-PROFESSIONAL CATEGORY OF THE FATHER :**

Code 99 Libellé Not specified

**SOCIO-PROFESSIONAL CATEGORY OF THE MOTHER:**

Code 99 Libellé Not specified

**SPORTS**

Are you a student and high level athlete :  yes Indicate the code  No

Financial support (Scholarship, allocation, PARE, etc.)

**CVEC**You are concerned (Exempt or not) :  Identification N° :You are not concerned : **YOU ARE PARTICIPATING IN INTERNATIONAL EXCHANGE PROGRAMMES**

You are coming from abroad (E)	Programme	You come from abroad (A)
<input type="checkbox"/>	ERASMUS	<input type="checkbox"/>
<input type="checkbox"/>	Other programmes and bilateral agreements	<input type="checkbox"/>
<input type="checkbox"/>	Other programmes and multilateral agreements	<input type="checkbox"/>
<input type="checkbox"/>	COMUE	<input type="checkbox"/>

Foreign establishment (receiving or originating)

Country

**LAST ESTABLISHMENT ATTENDED****Type of establishment:**

- LY – high school  16 – University  01 - S.T.S. (BTS)  02 - C.P.G.E. (classe prépa. aux grandes écoles)
- 10 – Higher education establishment abroad
- Other (indicate) :

Name of the establishment:

Department :

Country :

University year: -

**SITUATION PREVIOUS YEAR**

- Attended classes in 2017/2018
- Did not attend school in 2017/2018 but having already attended higher education
- Did not attend school in 2017/2018 and has never attended higher school

**Last diploma obtained**

- Baccalaureat
- 002 DAEU
- Other French diplomas  Foreign diploma in higher education  Foreign diploma in secondary education

Indicate heading of the diploma obtained:

Name of the establishment:

Department :

Country

University year: -

- No diploma for higher education

**OTHER ESTABLISHMENT ATTENDED FOR THE CURRENT YEAR**

(supporting document required)

Are you already registered in another establishment for 2018-2019 ? Yes :  No : 

Name of the establishment:

Department :

Are you confirming this registration? Yes (in parallel) :  No (change) :

## REGISTRATION REQUIRED AT UGA in 2018-2019

Main registration:

Other registration requested for UGA :

**For the LEA, LLCER, pro commerce degree** (indicate the speciality language) :

language A :

language B :

**For students attending Polytechnic Institute** Are you coming from a preparatory class

If yes, indicate which school :

**Do you have a scholarship for this curriculum** Yes :  No :

**Type of scholarship** : 02-Based on social criteria  06-Ministry for health  01-French government

Are you in a gap year Yes :  No :

RESERVE ADMINISTRATION	
Codes inscription	
Etape 1	_ _ _ _ _ _ _
VET	_ _ _ _ _ _ _
Etape 2	_ _ _ _ _ _ _
VET	_ _ _ _ _ _ _

### RESERVE FOR THE ADMINISTRATION

PROFILS	Adapeted curriculum	SITUATIONS SOCIALES
<input type="checkbox"/> NO NORMAL	<input type="checkbox"/> Gap year	<input type="checkbox"/> NO NORMAL
<input type="checkbox"/> FC ON GOING TRAINING WITH COVERAGE	<input type="checkbox"/> Agreement	<input type="checkbox"/> BO SCHOLARSHIP
<input type="checkbox"/> TL REMOTE LEARNING	<input type="checkbox"/> CPGE	<input type="checkbox"/> BE SCHOLARSHIP FROM ANOTHER COMUE UNIVERSITY
<input type="checkbox"/> AP APPRENTICESHIP	<input type="checkbox"/> Catholic institute	<input type="checkbox"/> PN WARD OF THE STATE
<input type="checkbox"/> PR PROFESSIONAL CONTRACT		<input type="checkbox"/> HA DISABILITY > = 80 %

## OPTIONAL RIGHTS

- CU training offer Yes  code N°:
- Language courses : Yes  code N°:
- CLES (Certificat de langues de l'enseignement supérieur) : Yes  code N°:
- FFSU License : Yes  code N°:
- Request for duplicate student card Yes  code N°:

## CIVIL LIABILITY

You have taken out Civil Liability Insurance (at any time, during the year, you be able to to show supporting documents for this coverage)

OUI  NON

## SOCIAL SECURITY

Student social security gradually disappears from the start of the 2018 school year. You do not have any more affiliation to make with the university, so no more contribution to pay.

- **1st case:** you are already a beneficiary of student social security (a mutual student): you keep it for this year. Contact your agency to find out the terms and conditions of renewal for 2018-2019.
- **2nd case:** You are a new student: you remain affiliated to the social security of your parents.
- **3rd case:** You are a new foreign student: you must contact the CPAM nearest your home in France.

I hereby declare i will comply with the Charter governing the information system of the university establishments belonging to the COMUE university Grenobles Alpes. The Charter is available on the UGA website.

I hereby certify as sincere and accurate all the information provided and declare having read the instructions enclosed with the dossier

In  
Signature

Date  
(And signature of the parents for minors) :

Complete Dossier: YES  NO