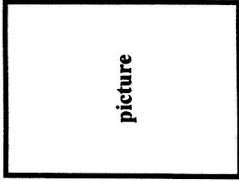


APPLICATION FOR VISITING STUDENTS AT THE TECHNION

Applicant Information:

Program: research internship
 Family Name: SORET
 Date of Birth: 26/10/1991 E-mail: ariane.soret@ens-cachan.fr Tel: +33675308379
 Home Address: 62 rue C. Desmoulins City: Cachan State/Province:
 Country: France
 Nationality: French Passport Number: 13DC80574 Sex: F



Current Affiliation

Home University Name : Ecole Normale Supérieure de Cachan
 Address: 61 av. President Wilson, 94235 Cachan cedex, France

Department: Physics Degree: Master Years Completed:

Average/GPA: _____ (Please note that we request a minimum of 80/100).

Details of Requested Visit

Requested Faculty (Department) to Visit at Technion: Physics

Requested Dates for Visit: **Year:** 2014/2015 **Semester:**

Specific Dates: 1/9/2014 to 30/7/2015 Knowledge of Hebrew: no

Already contacted a host at the Technion? Eric Akkerman, Physics

Do you want dorms at the Technion? yes

Do you have any medical/ physical conditions that might influence your visit? No

Date: 14/7/2014 Student's Signature: _____

Approval of Home University – must be signed

Name: TREUSSART François Position: Professor, internship supervisor for ENS Cachan Physics Dept

Signature: _____ Stamp: _____ Date: 16/07/2014

Complete and send this form along with the appropriate fee after reading the information below.

For Technion Office Use Student Number

שם משפחה: _____ שם פרטי: _____

--	--	--	--	--	--	--	--	--	--

שם התואר של יועץ אקדמי: <u>ד"ר פ. סורט</u> שם המלמד: <u>Eric Akkerman</u> סלולרי: <u>04-8293521</u> הערות: <u>אין צורך</u> תאריך: <u>18/07/14</u>	הפקולטה הקולטת בטכניון: <u>פיזיקה</u> אימייל: <u>eric@physics.technion.ac.il</u> המלצת הפקולטה ליועץ אקדמי: <u>נאשר</u>	למילוי: הועמה ע"י: יועץ אקדמי: או למילוי: חזרה: לפקס 3773 או: למילוי: incoming@nat.technion.ac.il
---	---	--