

INCOMING MOBILITY FORM MASTER

To be filled briefly but exactly

Direction de l'Enseignement et de la Formation

GENERAL INFORMATION	
Student (ID, birth date, ac	ddress, email, phone + sending institution, cursus, and year)
Mobility in Museum n	ational d'histoire naturelle (cursus to be followed in MNHN, duration, intended dates)
Financial /material con	
	Dects (please state clearly (1) the financial conditions in which your mobility will be carried out, financial help or accomodation, grants etc, precising whether they are applied for or secured; (2) any specific need or help you
would need or ask for)	accombation, grants etc, precising whether they are applied for or secured , (2) any specific need or help you
	PEDAGOGICAL INFORMATION
Nature et content of r	nobility (academic modules to be followed, training,, internship etc.)
	(academic medice to be foliotical, dramming), medicine in etc.)
Inches and a second at the second	hilitar for recommendate hardest (100 m m m m m m m m m m m m m m m m m m
importance of the mo	bility for your personal project (qualification, motivation etc)
Language skills (menti	ion your usual language, your skills in English, French and others)
Supervisors (names and	contact)
in your institution	
in MNHN	
Briefly state the natur	e of the contacts undertaken with both supervisors and provide any relevant information :
,	
Date et Signature (commit	ment to fill
requested report before leaving MNHN)	