

## UE TRANSVERSALE INTERCULTURALITÉ Registration Form

Please note that you can only apply if you are studying for a Licence or a Masters degree.

PLEASE	USE	CAF	PITAL	LET	TERS
--------	-----	-----	-------	-----	------

Last name :
First name :
Date of birth :/
Nationality :
Phone number :
Address :
Postal Code : City :
Email address
MOTHER TONGUE :
Student ID :
Department studies at uB
Degree followed :
TUTORING HOURS¹ (3 hours) during our opening hours:
LANGUAGE CLASS YOU WISH TO ATTEND FOR THE COURSE OFFERED BY THE CENTRE DES LANGUES: Indicate the day, time and level (Beginner A1, Elementary A1-A2, Pre-Intermediate A2, Intermediate B1, Advanced B2, Expert C1)
Contact Us: centre.langues.cultures@u-bourgogne.fr

<sup>&</sup>lt;sup>1</sup> Opening hours: Monday to Thursday: 9am -5pm, Friday 9am-noon.