

# INSTITUT D'ETUDES FRANÇAISES D'AVIGNON 2008

under the auspices of Bryn Mawr College  
Undergraduate Application for Admission

## Applicant Information

Name:		SS#:	
Date of birth:	e-mail:		
Place of Birth/Nationality		Passport #:	
Current address:			
City:	State:	ZIP Code:	Phone:
Permanent address:			
City:	State:	ZIP Code:	Phone:

## Academic Information

Secondary School:	
College or University:	
Year graduating:	Major Subject:
Number of years you have studied French: a. in school _____ b. in college _____ (Attach list and brief description of college courses taken in French)	
Previous foreign travel or study: _____ _____	
Reasons for wishing to join our Program: _____ _____ _____	
Scholarships, honors or prizes received, if any: _____	
Plans after completing B.A.: _____	

## Emergency Contact Information

Parents' Names:			
Address:			
City:	State:	ZIP Code:	Phone:

## References

The following are required of all applicants:

1. Letter of recommendation from one of your professors.
2. Letter of recommendation from your academic dean, or academic advisor.
3. Official transcript.
4. A \$25.00 non-refundable check payable to **Bryn Mawr College**

All correspondence should be sent to:  
**Program Assistant**  
**Institut d'études françaises d'Avignon**  
**Bryn Mawr College**  
**101 N Merion Avenue**  
**Bryn Mawr, PA 19010**

## Deadline

Applications are due by **March 15**.

## Signature

Signature:	Date:
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