

Academic year 2026-2027

This Admission Form must be filled in by the applicant and sent to:

Sandrine Matthieu

International Mobility Coordination – Exchange Programs

Ecole Polytechnique de Louvain

E-Mail : epl-exchange@uclouvain.be

before 15th April if the stay at UCLouvain covers the **full academic year or first semester** (September 14 - January 23),

before 15th October if the stay covers the **second semester** (February 1 - June 26) for **NON-EU** students

before 31st October if the stay covers the **second semester** (February 1 - June 26) for **EU** students.

with the following documents:

1. A photocopy of identity card or passport (properly scanned in pdf format)
2. An ECTS Learning Agreement signed by the student and the academic coordinator of the sending institution
3. An **official** transcript of records of **all** previous years in higher education
4. A language proficiency certificate for French and/or English (see requirements at: <https://www.uclouvain.be/fr/facultes/epl/languages-of-instruction>)
5. The signed "Regulations and data protection form"

Please do not merge these 6 documents.

They must be in pdf format.

Please rename your documents as follows:

- SURNAME First name_EPL Admission Form
- SURNAME First name_IDCard or SURNAME First name_Passport
- SURNAME First name_Learning Agreement
- SURNAME First name_TOR
- SURNAME First name_English certificate and/or SURNAME First name_French certificate
- SURNAME First name_Regulations and data protection form

Veuillez compléter le formulaire en MAJUSCULES et le signer avant de nous le renvoyer
Please fill in the form in CAPITAL LETTERS and sign it before returning it to us.

Nom(s) Last Name(s)		Prénom(s) First name(s)	
Sexe Gender	Masculin ☐ male Féminin ☐ female Autre ☒ other	Date de naissance (JJ/MM/AAAA) Date of birth (DD/MM/YYYY)	
Lieu de naissance Place of Birth		Pays de naissance Country of birth	
Nationalité Citizenship		Etat civil Civil status	Célibataire ☐ single marié(e) ☐ married divorcé(e) ☐ divorced veuf(ve) ☐ widowed
Courriel E-mail		GSM Mobile number	

Adresse dans le pays d'origine

Home country address

Rue Street		Nr Number		Bte Apartment		Code postal Zip Code	
Ville City		Etat State					
Pays Country		Téléphone Phone number					

Inscription à l'université d'origine

Current enrolment at home institution

Nom de l'université d'origine Name of home institution			
Etudes poursuivies Field of study/programme at home institution		Niveau Level	Bachelor ☐ Undergraduate Master ☐ Master Doctorat ☐ PhD
Nom de votre coordinateur du programme d'échange Name of exchange coordinator		Courriel E-Mail	

Séjour d'études à l'Université catholique de Louvain

Study period at Université catholique de Louvain

Durée du séjour à l'UCLouvain Duration of stay at UCLouvain	1 ^{er} quadrimestre 1st term ☐	2 ^{ème} quadrimestre 2nd term ☐	Année académique Academic year ☐
Date d'arrivée (JJ/MM/AAAA) Date of arrival (DD/MM/YYYY)			Date de départ (JJ/MM/AAAA) Date of departure (DD/MM/YYYY)

Niveau en langue (échelle CEFR) Language Proficiency (CEFR scale)

Voir / see <https://www.coe.int/en/web/common-european-framework-reference-languages/level-descriptions>

☐ Français - French	A1 ☐	A2 ☐	B1 ☐	B2 ☐	C1 ☐	C2 ☐
☐ Anglais - English	A1 ☐	A2 ☐	B1 ☐	B2 ☐	C1 ☐	C2 ☐

Je déclare sur l'honneur que les renseignements qui précèdent sont exacts et que je dispose des moyens financiers nécessaires pour couvrir mes frais de séjour et d'études en Belgique et ceux des personnes qui m'accompagnent. Je m'engage à ne pas devoir être pris en charge par l'Université catholique de Louvain, ni par les pouvoirs publics belges.

I hereby declare that the above information is true and correct and that I have sufficient financial means to cover my living and study expenses, including the cost of people accompanying me. In applying for admission, I declare that I will never depend financially upon the Université catholique de Louvain, nor upon the Belgian authorities.

Fait à: le
Done at: on

Signature de l'étudiant(e):
Student's signature:

Le présent bulletin dûment complété et signé, accompagné des annexes requises, doit être renvoyé au plus tard pour le 15 avril (1er quadrimestre) ou le 15 octobre (NON UE) / 31 octobre (UE) (2ème quadrimestre) à l'adresse courriel suivante, sous format PDF:

Please return the completed and duly signed form, accompanied by the required appendices, before April 15th (1st term) or October 15th (NON EU) / 31st (EU) (2nd term) in PDF format to the following address:

E-mail: epl-exchange@uclouvain.be

Veuillez joindre les documents suivants avec ce fichier PDF :

Please join the following documents with this PDF file:

1. Une photocopie de la carte d'identité ou du passeport (correctement scanné en format pdf).
A photocopy of national identity card or passport (properly scanned in pdf format).
2. La convention d'études ECTS, signée par l'étudiant et le coordinateur académique de l'université d'origine.
The ECTS Learning Agreement, signed by the student and the academic coordinator of the home institution.
3. Un relevé de notes **officiel** de chacune des années d'études universitaires antérieures.
*An **official** transcript of records including **all** the grades you achieved for each subject of all previous years in higher education.*
4. Le document "Règlement - vie privée" signé
The 'University Regulations and Data Protection' signed form.
5. Un certificat de compétence linguistique pour le français et/ou l'anglais (voir les exigences requises ci-après : <https://www.uclouvain.be/fr/facultes/epl/languages-of-instruction>)
A language proficiency certificate for French and/or English (see requirements at: <https://www.uclouvain.be/fr/facultes/epl/languages-of-instruction>).

A son arrivée en Belgique, l'étudiant·e devra se présenter dans sa faculté, muni de sa carte européenne d'assurance maladie ou de la preuve d'une assurance privée.

Upon arrival in Belgium, the student has to go to the faculty with the European Health Card or the proof of private insurance.

Ne pas remplir ci-dessous – réservé au responsable académique UCLouvain ou son délégué

Please do not complete below – reserved for UCLouvain academic coordinator or delegate

Nom du responsable académique

Prof.

Type d'échange

☐

Erasmus+

☐

Erasmus Belgica

☐

Autres conventions bilatérales

☐

Autres (spécifiez)

Code université
d'origine

Inscription à
l'UCLouvain

EPL IN

Faculté

EPL

CP/École

Date

Signature

Academic year 2026-2027

Your academic curriculum - Higher education prior to the current academic year

Academic Year	Name of institution	Study field	Result (%) / GPA (Grade Point Average)
2021 - 2022			
2022 - 2023			
2023 - 2024			
2024 - 2025			
2025 - 2026			

List of courses currently followed at your home university *

Course code	Course title (in English or in French)

* Logically, these are the courses that are not included in your last official Transcript of Records and/or the courses for which you have not yet received a grade.

Academic year 2026-2027

2026-2027 Exchange student RegistrationPlease choose the most relevant field of study (**only ONE** field) at the Ecole Polytechnique de Louvain-la-Neuve (EPL):

☐ Bachelor in Engineering (in French!)	☐ Master in Biomedical Engineering (GBIO)
☐ Bachelor in Computer Science (in French!)	☐ Master in Chemical and Materials Engineering (KIMA)
☐ Master in Civil Engineering (GCE)	☐ Master in Physical engineering (FYAP)
☐ Master in Mathematical Engineering (MAP)	☐ Master in Electrical Engineering (ELEC)
☐ Master in Data Science Engineering (DATE)	☐ Master in Energy Engineering (NRGY)
☐ Master in Data Science: Information Technology (DATI)	☐ Master in Electro-mechanical Engineering (ELME)
☐ Master in Computer Science (SINF)	☐ Master in Mechanical Engineering (MECA)
☐ Master in Computer Science and Engineering (INFO)	

Please specify the name of the person to whom your official Transcript of Records should be sent at the end of your exchange (from your home university, not you):

Last name:

First name:

E-mail address:

Approval of Student Exchange Coordinator at your home University

The undersigned

authorizes

to undertake an exchange study program at UCLouvain-EPL

Signature:

Date (DD/MM/YYYY):

Institutional stamp: