

REGISTRATION FORM – MODULE I

More information on:
www.cas-recherche-provence.ch

PERSONNAL DETAILS

Last name: _____
First name: _____
Address: _____
ZIP / City: _____
Country: _____

Profession: _____
Date of birth: _____
Mother tongue: _____
E-mail: _____
Phone number: _____

PROFESSIONAL DETAILS

Institution: _____
Role: _____
E-mail: _____
Phone number: _____

Adresse: _____
ZIP / City: _____
Country: _____

INITIAL EDUCATION

Organization: _____
Qualification obtained: _____
Year of graduation: _____
District/Country: _____

OTHER DEGREES AND CERTIFICATES

BILLING AND CORRESPONDENCE

Where would you like to receive general correspondence?
Where would you like to receive the invoice?

Private Professionnal
 Private Professionnal

REGISTRATION FEES

The fee of **CHF 2,800** (or CHF 2600 if eligible) must be paid as soon as confirmation of Module I is received. Payment can be made in instalments upon written request at the time of registration.

REGISTRATION

- The registration deadline is **Sunday 19 January 2025**.
- Confirmation of the course will be sent on Monday 20 January 2025.
- The number of participants is limited to 20.
- Registrations will be accepted on a first-come, first-served basis.

SUBMITTING THE APPLICATION

Please return this registration form, duly completed and signed, together with a **curriculum vitae** and **copies of diplomas**, to Caroline Ferrazzo at the following e-mail address: caroline.ferrazzo@unine.ch.

By signing, I certify that I have completed this form accurately and completely. I confirm that I have read the registration and cancellation conditions in the flyer, the registration form and on the course website. I agree to respect the payment conditions and to pay the amount due as soon as I receive confirmation of the course.

Date and location: Signature: