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**Application form for acceptance as a doctoral candidate**

**TO BE TRANSMITTED IN FULL, IN ELECTRONIC FORM, AS A SINGLE FILE, TO THE GRADUATE SCHOOL,**

**WITH COPIES TO THE PHD SUPERVISOR AND THE DIRECTORS OF DOCTORAL STUDIES (DDS\*) AND OF THE LABORATORY**

**Contact: ED SMRE – 104 Cité Scientifique, Building P5, Room 17,   
Phone:** 🕿 **+33 3 20 43 40 62 – Email:** 🖂[**sec-edsmre@univ-lille.fr**](mailto:sec-edsmre@univ-lille.fr)

Identity photo

**THE APPLICANT**

Family name: ................................................................First name:

Common name (if different from the family name):……………………………………………………Gender: ….

Date of birth: Place of birth:

Country: Nationality: ………………………………………..

Adress:

City: …………………………………………………....................... PostCode:

Email: 🖂 ……………………….…….…@……………………………….. Phone: 🕿

*If this e-mail address is no longer valid at the end of the academic year, specify, if possible, a permanent e-mail address.*

N° INE (“identifiant national étudiant”, French national student ID) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_

*(11 characters – Only if you have already been enrolled in a French higher education institution) *

**DEGREE PERMITTING THE PHD ENROLLMENT**

***(The certificate of achievement, grades and ranking should be provided as soon as possible, in particular for M2)***

Exact title

Research experience

University or institution (indicate the country, if outside France)

Date of graduation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(DD/MM/YY)*

Provide the names and e-mail addresses of the persons in charge of your research internship and of the last education year:

**REQUIREMENTS**

PhD applications are restricted to graduates holding a Master degree or equivalent and unemployed at the time of the enrollment. There is no age, date of graduation or nationality restrictions.

Candidates wishing to apply have only one application to complete. This must be filled in electronically and sent in electronic format only (pdf) by the candidates, after signature by the thesis and laboratory directors.

List (in order of preference) of GS SMRE thesis subjects to which you are applying

**(Maximum: 3 topics)**

***Please note: Candidates wishing to apply must first contact the thesis supervisor responsible for the project. Any application that has not been validated by the thesis and laboratory directors will not be accepted. A copy of the application is also sent to the doctoral studies department associated with the laboratory\*.***

**THESIS SUBJECT #1:**

PhD enrollment institution:

Host laboratory:

Title of the thesis:

Name(s) of the PhD thesis supervisor(s):

Speciality (in accordance with your thesis supervisor)[[1]](#footnote-1) :

Type of funding (grant, research organisation, CIFRE, main job not dedicated to the thesis, other) :

Date of the compulsory interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***(DD/MM/YY)***

Name(s) and Signature(s) of the thesis supervisor(s): Name and Signature of the Laboratory Director:

**THESIS SUBJECT #2:**

PhD enrollment institution:

Host laboratory:

Title of the thesis:

Name(s) of the PhD thesis supervisor:

Speciality (in accordance with your thesis supervisor) :

Type of funding (grant, research organisation, CIFRE, main job not dedicated to the thesis, other) :

Date of the compulsory interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***(DD/MM/YY)***

Name(s) and Signature(s) of the thesis supervisor(s): Name and Signature of the Laboratory Director:

**THESIS SUBJECT #3:**

PhD enrollment institution:

Host laboratory:

Title of the thesis:

Name(s) of the PhD thesis supervisor:

Speciality (in accordance with your thesis supervisor) :

Type of funding (grant, research organisation, CIFRE, main job not dedicated to the thesis, other) :

Date of the compulsory interview: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***(DD/MM/YY)***

Name(s) and Signature(s) of the thesis supervisor(s): Name and Signature of the Laboratory Director:

**PROCEDURE FOR SUBMITTING THE APPLICATION FORM**

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|  | **Submitting an application** | **Required documents** |
|  | Send a complete file to ED SMRE:  sec-edsmre@univ-lille.fr  copy to :  - the thesis director  - the director of doctoral studies \*  of the laboratory  as a single file in pdf format:  "lastname.firstname\_LaboratoryAcronym.pdf” | 1. This application form 2. A detailed CV (with the entire curriculum since the French baccalaureate or its equivalent) 3. Copy of an identity document (*both sides - currently valid*) 4. A cover letter (***in which you must also declare on your honour that you have not registered for a thesis previously***) 5. A summary of the internships and research work already completed and research work 6. For the two previous years, a copy of the diploma (***Master or equivalent***) and the detailed results and all possible comparative elements (***ranking***, ...); and for this year, the provisional results in your possession, the modules followed, the additional trainings, ...   (***for documents in a foreign language other than English, provide a translation in French or English***).   1. Possible additional documents (Cifre, PhD co-direction, joint international supervision)   <https://edsmre.univ-lille.fr/rejoindre-led/candidature>   1. If the laboratory is in a Restricted Area or if the applicant is from outside the European Union, it is absolutely necessary for the laboratory to make a prior application for a Restricted Area. **In this case, please attach a certificate from the laboratory stating that this has been done.** |

**This application form does not constitute in any way a PhD registration at any institution.**

1. Find the specialities on the ED SMRE website: https://edsmre.univ-lille.fr/lecole-doctorale-smre [↑](#footnote-ref-1)