

Student Identity

First Name: _____

Family Name: _____

Home Institution

Name: _____

ERASMUS Code: (for European institutions) _____

Student advisor: _____

Host Institution

 Name: Ecole Centrale de Nantes

 ERASMUS Code: F NANTES07

 Specialisation's advisor: Myriam SERVIERES
SPECIALISATION: Digital City

Semester		Course title	ECTS Credits	Choose your courses
Spring Semester (February – July)	Specialisation courses	Urban Morphogenesis Workshop	3	<input type="checkbox"/>
		City Representation	3	<input type="checkbox"/>
		Image analysis and processing	3	<input type="checkbox"/>
		Urban Policies	3	<input type="checkbox"/>
		Project 2	2	<input type="checkbox"/>
		Industrial or Laboratory Placement	14	<input type="checkbox"/>
	Sports & Languages	Sports	0.5	<input type="checkbox"/>
		Foreign Languages	0.5	<input type="checkbox"/>

TOTAL:

Student signature	Date:
Home institution advisor (Name and signature)	Date:

Host Institution Departmental Coordinator (Name and signature) Date:	Institutional Coordinator Date:
---	--