

Academic year 2022-2023

Complete this ECARES application form and return it by email (together with your transcripts, curriculum vitae, master's thesis copy (if available) and motivation letter) by March 31 for non-EU members and September 30 for EU citizens to: admissions.sbsem@ulb.be & anne-marie.notarianni@ulb.be.

Proceed also to the formal and official part of the ULB application process, which is done online at: [Submit your application - ULB](#). This administrative procedure is mandatory, please respect the deadlines.

Be aware that a hard copy of the file may also be requested by post to the following address: Director of Graduate Admission - ECARES Doctoral School - Université libre de Bruxelles, CP 114/04 - 50, Av. F.D. Roosevelt - 1050 Bruxelles – Belgium. The three recommendation letters must be sent to the Director of Graduate Admission by the referees to the same email. For queries, please contact: anne-marie.notarianni@ulb.be

YOU APPLY FOR (check one of the following options)

Carefully check the General Presentation of the ECARES Doctoral School to know for which option you should apply

- Research Master in Economics (M-ECOER)
- Research Master in Statistics (M-ECOES)
- Thesis writing phase in Economics and/or Statistics

PERSONAL INFORMATION (write in capital letters)

Family name:	First name:
Date of birth:	Place of birth:
Email:	Nationality:
Phone:	

ADDRESS (write in capital letters)**PRESENT**

Street and number:		
Country:	City	Post code:

PERMANENT

Street and number :		
Country :	City :	Post code :

FINANCIAL AID

Do you have your own sources of financial support?

 YES

 NO

Did you apply for any grant?

 YES

 NO

Which one(s)?

EDUCATION AND EMPLOYMENT (write in capital letters)

List in chronological order all colleges and universities attended, starting with the most recent first:

NAME & LOCATION OF INSTITUTION	MONTH & YEAR OF ATTENDANCE		DEGREES RECEIVED
	From	to	
	From	to	
	From	to	
	From	to	
	From	to	

LIST EMPLOYMENT ACTIVITIES (write in capital letters)

EMPLOYER	OCCUPATION/TITLE	MONTH & YEAR	
		From	To

LANGUAGES

Working knowledge of English is required. Give a frank statement about your level of English and support your statement with any formal or informal qualifications that might help the Admission Committee in evaluating your application.

	WRITTEN			READ			SPOKEN		
	Very good	Average	Poor	Very good	Average	Poor	Very good	Average	Poor
ENGLISH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRENCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REFEREE DETAILS (write in capital letters)

Ask **three persons who know your academic trajectory** to write letters on your behalf, using the enclosed forms. List their names and addresses:

NAME	POSITION & AFFILIATION	EMAIL

Academic year 2022-2023

Writers of letters of recommendation are requested to **write a statement in a separate page** and **answer the questions below**. The ECARES Doctoral School is grateful for any relevant information regarding the applicant, but would particularly appreciate the writer's opinion of the candidate's ability to carry out advanced studies. A careful discrimination between strong and weak characteristics of the candidate would be more helpful than routine praise.

Please forward this letter (by March 31 for non-EU members and September 30 for EU citizens) by email to anne-marie.notarianni@ulb.be

Information in this letter will be kept confidential. Thank you for your cooperation.

Name of Applicant _____, _____
 Family name First name

Please rate the applicant in comparison with others of his/her age and position whom you have known within the past five years. If possible indicate the number of students with whom you are comparing him/her with: _____

	Upper 1 % or 2 %	Upper 10 % but not upper 1 % or 2 %	Upper 25 % but not upper 10 %	Upper half but not upper 25 %	Lower half	No basis for judgement
Academic performance						
Intellectual Ability						
Motivation						

Potential as a teaching assistant: High Adequate Inadequate No basis for judgement
 Potential as a research assistant: High Adequate Inadequate No basis for judgement

How long have you known the applicant? _____? In what capacity?

Undergraduate Graduate Research assistant
 Teaching assistant Student in several classes Student in one class
 Other: _____

Signature: _____ Date: _____

Printed name: _____ Position _____

Affiliation : _____ Email : _____

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 Other: _____

Signature: _____ Date: _____

Printed name: _____ Position _____

Affiliation : _____ Email : _____

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