

ESCE 2-Year Master's Degree International Admission

Paris

Program Application Package

10 rue Sextius-Michel, 75015 Paris France
Telephone: +33 (0)1 81 51 15 38 – fax: +33 (0)1 81 51 15 45
email: intl_admissions@esce.fr – www.esce.fr



ESCE 2-Year Master's Degree

École Supérieure du Commerce Extérieur 10 rue Sextius-Michel 75015 Paris, France Tel. +33 (0)1 81 51 15 38 Fax. +33 (0)1 81 51 15 45 Email: intl admissions@esce.fr

Dear Applicant:

We are pleased that you have chosen to apply to the **ESCE 2-year Master's degree program** in Paris. The selection process is based on a combination of an individual's academic performance, personal characteristics and motivation, as well as the additional documentation requested.

This document contains the materials necessary to complete the application form and the two letters of recommendation.

Please use the **Application Checklist** below as a guide to ensure that all the necessary elements are sent to the address below:

École Supérieure du Commerce Extérieur Attention: International Admissions, 2-Year Degree Program Manager 10 rue Sextius-Michel 75015 Paris France

Re	Registration Package Check-list:					
	Please check that all of the following items are included in your registration package before sending it to ESCE:					
	Completed Application Form and attached photo					
	For non-native English or French speakers, TOEFL or IELTS scores (or its equivalent) for English language requirement AND/OR TEF (or its equivalent) for French language placement OR the date of next test to be taken, if not taken					
	Two signed and sealed Letters of Recommendation (1 academic & 1 professional OR 2 academics)					
	Recent Resume/CV					
	Copy of Undergraduate Degree certificate (as well as other degrees obtained at a higher level of education)					
	An official final transcript of grades for the undergraduate degree program					
	A statement of interest – why you wish to participate in the ESCE degree program, what your goals are (approximately 200 words). This statement should be addressed to the Admissions Committee.					
	A copy of your current passport					



École Supérieure du Commerce Extérieur

75015 Paris, France Tel. +33 (0)1 81 51 15 38 Fax. +33 (0)1 81 51 15 45

Email: intl_admissions@esce.fr

Personal Information					
Family Name: First Name:					
		Please affix a			
Date of Birth:	□ M □ F	passport sized photo here			
Marital Status: ☐ Single ☐ Married	☐Other				
Nationality: Passport N°.					
Mailing Addresses					
Current Mailing Address:	rrent Mailing Address: Permanent Address: (if different from current address)				
Street Name and N°	Street Name and N°.				
City: State:	City: State	:			
Postal Code: Country:	Postal Code: Coun	try:			
Contact Information					
Telephone 1: (inc	sluding area code)				
Telephone 2: (including area code)					
Fax: (inclu					
E-mail:					



Educational Ba	ckground					
Degree:	Fie	eld of Study:				
University:		City:				
Country:	Grade Po	int Average: Year Conferred:				
Dates of attendance:	from/ (mm/yyyy)					
Degree:	Fie	eld of Study:				
University:		City:				
Country:	Grade Po	int Average: Year Conferred:				
Dates of attendance:	from/ (mm/yyyy)					
Degree:	Fie	eld of Study:				
University:		City:				
Country:	Grade Po	int Average: Year Conferred:				
Dates of attendance:	from/ (mm/yyyy)					
The name of highest of	iploma obtained:					
The level of highest e	ducation completed: (che	eck one)				
☐ Undergraduate	□Masters	☐ Other:				
The field in which you earned your highest degree: (check one)						
Engineering	☐ Health	☐ Sciences ☐ Law				
Business	Economics	☐ Other:				
List any awards, honors, distinctions and other achievements						



Language	Proficienc	У					
What is your native language?							
Please indicate (Fill in blanks fo			h of the	followin	ig languages, υ	ising the scale p	rovided below.
0 = No Knowledge 1 = Limited Knowledge 2 = Fair oral, verbal, reading comprehension and written expression 3 = Good oral, verbal, reading comprehension and written expression 4 = Fluent in all areas of language 5 = Native language							
	0	1		2	3	4	5
English							
French							
Language	Tests						
English Langu (ie. TOEFL, IEL					h Language To F, DALF, DEL		
If already taken	, please indicate	e which test:		If already taken, please indicate which test:			
And date of mos	st recent test tal	ken:		And date of most recent test taken:			
/ (dd/mm/yy				/			
Score(s) obtained:				Score(s) obtained:		
If not taken, please indicate what date you intend to take the test:				If not taken, please indicate what date you intend to take the test:			
/(dd/mm/yyyy)				/(dd/mm/yyyy)			



Professional Background (beginning with most recent activity) The following information may include any past work experience including full-time, part-time, internships, and any other work placement experience gained. Total years of work experience: 1. Title: Type of Position: Responsibilities: Period from:/...../...... to:/...../..... (dd/mm/yyyy) (dd/mm/yyyy) 2. Title: Type of Position: Responsibilities: Period from:/...../..... to:/...../..... (dd/mm/yyyy) (dd/mm/yyyy) Responsibilities: Organization: City: Country: Country: Period from:/..... to:/...... (dd/mm/yyyy) (dd/mm/yyyy) **Statement of Accuracy:** I hereby state that the information contained in this application is true and accurate. Signature of applicant: Date:/....... (dd/mm/yyyy)



Selecting a major						
The following are the specializations opened to international students at ESCE to obtain the 2-year ESCE Master's degree offered in English and in French .						
All first year courses comm	nence in the Fall semester.					
Please select "one" specia	lization you wish to follow.					
To receive more information the 2-year Masters program		ease consult the information I	prochure/presentation on			
**Please note: the course module	es in International Trade will	be incorporated in each spec	ialization as a core			
Specializations (offered in English)	Indicate your selection	Specializations (offered in French)	Indicate your selection			
International Marketing		Marketing International Option: Luxe (Luxury Goods)				
International People Management		Marketing International Option: Grande Consommation (Consumer Packaged Goods)				
Supply Chain Management		Finances Internationals				
Question How did you hear about the ESCE Master's program? Please be as specific as possible (ie: friend, ESCE alumni, your university, Google search (word), MasterStudies site, Study Portals, etc.).						



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Letter of Recommendation

Applicant: Please fill in your name and date of birth, and forward to the person who will provide you the recommendation. Ask your referee to return the recommendation form to you in a sealed and signed envelope. Do not open the envelope, but please return it with the registration package.

Applicant's Family Na	me: First Name:
Date of Birth:	Day Month Year
applicant's abilities by c candidate will not hav assessment, we ask th	We would greatly appreciate it if you could provide us with an assessment of the ompleting this form. This assessment will be used solely for admission purposes. The ean access to the information provided. To ensure the confidentiality of this at you place it in an envelope. Seal the letter and sign it across the seal to ensure turning it to the candidate who will include it in his or her registration package.
Recommender's Family	Name: First Name:
Position Title:	
Your Company Name &	Address:
Tel:(including area code)	Pax: Other:
Email:	



low long have	you known the ca	iiuluale: III WII	ai context (lla	iture and nequ	chey of contac	noj:
						• • • • • • • • • • • • • • • • • • • •
What do you c	onsider to be the a	pplicant's strer	ngths and wea	ıknesses? Plea	ase comment o	on the possible



Please rate the candidate on the following criteria: *If you do not have any information on a particular category, please select the box labeled None.

	Outstanding	Excellent	Good	Average	Weak	*None
Intellectual Ability						
Communication Skills						
Group-Work Skills						
Drive/Determination						
Self-Discipline						
Initiative						
Maturity						
Leadership Potential						
Analytical Skills						
Creative Innovative Approach						
Organizational Ability						
Ability to Operate in an International Environment						
Overall Academic Ability						
Do you have any additional of	comments concer	rning this appl	icant that y	ou believe to	o be releva	ant?
Signature of the referee:				Date:		



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Date of Birth:	Day MonthYear	
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Recommender's Fam	nily Name: First Name:	
Position Title:		
Your Company Name	e & Address:	
Tel:(including area code)	Other:	
Email:		



How long have you known the candidate? In what context (nature and frequency of contacts)?
What do you consider to be the applicant's strengths and weaknesses? Please comment on the possible distinctions that the applicant would have compared to other individuals.



Please rate the candidate on the following criteria: *If you do not have any information on a particular category, please select the box labeled None.

	Outstanding	Excellent	Good	Average	Weak	*None
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Communication Skills						
Group-Work Skills						
Drive/Determination						
Self-Discipline						
Initiative						
Maturity						
Leadership Potential						
Analytical Skills						
Creative Innovative Approach						
Organizational Ability						
Ability to Operate in an International Environment						
Overall Academic Ability						
Do you have any additional of	comments concer	rning this appl	icant that y	ou believe to	o be releva	ant?
Signature of the referee:				Date:		