

## ADMISSION REQUIREMENTS FOR CERTIFICATE PROGRAM

All candidates must have completed a Bachelor's degree, or its equivalent.

### PREPARING YOUR APPLICATION

**Transcripts** We must receive official transcripts from the university that awarded your most recent degree. Ask the school concerned to send the transcripts to AGS at the mailing address below.

**Documents in a language other than English** must be accompanied by certified translations. Notarized translations alone will not be accepted, as translations do not replace original documents. Both originals and translations must be received in order for an application to be processed.

**Proficiency in English** All applicants whose mother tongue is other than English are required to give proof of proficiency in English. This could be a TOEFL score (Test of English as a Foreign Language), Cambridge Proficiency exam or other recognized test. This would be waived if you graduated from a university where the language of instruction was English. If you cannot supply any of the above the admissions committee will interview you to determine that your level of English is sufficient to enter this program. This could be by telephone.

**Personal Statement** The personal statement allows the admissions committee to get to know you better. Write a brief statement telling us about yourself and why you wish to undertake this certificate program. (if you want to write more then use a separate page)

**Application fee** The application fee of fifty euros should be paid online at <http://www.ags.edu/payment/login.php>  
Your application will not be processed until the application fee has been received.

**Application form** Complete the application form, sign and date it and send it by mail, Internet or fax, with your personal statement, and any other document you wish to attach that you feel is relevant to your application.

**Please Note** *No document or fee received by AGS will be returned to the applicant.*

*Applications will only be processed when all documentation has been received, and the application fee paid.*

### Mailing address:

Mr Matthew Delabre  
Admissions  
School of International Relations and Diplomacy  
American Graduate School in Paris  
101 boulevard Raspail  
75006 Paris  
France

Email: [matthew.delabre@ags.edu](mailto:matthew.delabre@ags.edu) Telephone: +33 (0)1 47 20 00 94 Fax: +33 (0)1 47 20 81 89

## CERTIFICATE PROGRAM APPLICATION

Semester(s) and year you wish to attend AGS: \_\_\_\_\_

Which Certificate do you wish to earn: (please note that some elective courses are offered every second year)

\_\_\_\_\_

### PERSONAL DATA

Family/Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name(s): \_\_\_\_\_

Sex: \_\_\_\_\_ Nationality: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(dd/mm/yyyy)

Address to which you wish mail to be sent during the application process. Give limit of validity if applicable:

\_\_\_\_\_  
\_\_\_\_\_

Permanent address:  
(if different from above)

\_\_\_\_\_  
\_\_\_\_\_

Permanent email address: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (work): \_\_\_\_\_

Mother tongue: \_\_\_\_\_ Language(s) spoken at home: \_\_\_\_\_

List any other languages you speak: \_\_\_\_\_

### ACADEMIC BACKGROUND

University (Name, Country): \_\_\_\_\_ Graduation year: \_\_\_\_\_

Degree obtained: \_\_\_\_\_ Area of concentration: \_\_\_\_\_

Other university experience: \_\_\_\_\_

### PROFICIENCY IN ENGLISH (for candidates whose mother tongue is not English)

What proof of proficiency in English are you submitting? \_\_\_\_\_

Did you attend a university where the language of instruction was English? \_\_\_\_\_

Do you wish to be interviewed by a member of the Admissions Committee? \_\_\_\_\_

**PERSONAL STATEMENT**

Write a brief statement here telling us about yourself and why you wish to undertake this certificate program.

**HOW DID YOU HEAR ABOUT THIS PROGRAM:** CHECK ALL THAT APPLY (Please give details where possible):

- |   |   |
|---|---|
| <input type="checkbox"/> ONLINE SEARCH ENGINE? _____      | <input type="checkbox"/> EMBASSY/CONSULATE _____              |
| WHAT KEYWORDS DID YOU ENTER? _____                        | <input type="checkbox"/> PROFESSOR/ADVISOR/CAREER ENTER _____ |
| _____   | <input type="checkbox"/> AGS STUDENT / ALUMNI _____           |
| _____   | <input type="checkbox"/> AGS PROFESSOR/ STAFF MEMBER _____    |
| <input type="checkbox"/> ONLINE EDUCATION DIRECTORY _____ | <input type="checkbox"/> ALLIANCE FRANÇAISE/ARCADIA _____     |
| <input type="checkbox"/> PRINT EDUCATION DIRECTORY _____  | <input type="checkbox"/> OTHER _____                          |
| <input type="checkbox"/> UNIVERSITY FAIR _____            |   |

**SIGNATURE:**

**Date:**

**SEND YOUR APPLICATION TO :**

Mr Matthew Delabre  
Admissions  
School of International Relations and Diplomacy  
American Graduate School in Paris  
101 boulevard Raspail  
75006 Paris  
France