



ÉCOLE DUCASSE

— ÉCOLE NATIONALE —  
SUPÉRIEURE DE PATISSERIE

APPLICATION PACKAGE

Bachelor Program



# APPLYING TO ÉCOLE DUCASSE - ENSP CAMPUS

Step by step guide

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## 1. Submit your application

In order to apply to the École Ducasse - ENSP Campus programs please send your application by email to [international.enrolment@ecoleducasse.com](mailto:international.enrolment@ecoleducasse.com) or to your Education Counselor.

### REQUESTED DOCUMENTS:

Completed Application form  
Motivation Letter  
Curriculum Vitae  
Copy of Passport  
Proof of Academic records and French level B2  
Letter of commitment from financial sponsor  
Parental consent for applicants under 18 years of age *(where applicable)*  
Copy of French Bacalauréat Diploma or Equivalent Level 4 (European level) – comparability statement from ENIC NARIC

## 2. Prepare for your admissions assessment

Following the submission of your completed application form and relevant documents, we will contact you to schedule an admissions assessment.

## 3. Receive acceptance letter – if successful

Once the application request has been approved by the École Ducasse Admission committee, you will receive your offer letter and the acceptance package, which will include the invoice, and further important documentation that need to be completed and signed.

## 4. Confirm your place at École Ducasse

You will need to pay the required down payment to confirm your place, within the required timeline.

## 5. Receive pre-arrival support

Right up until you arrive on our campuses, you will receive dedicated support to help with any questions that you might have.

# APPLICATION FORM

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## 1. About the applicant

Gender:    male        female

Family name: \_\_\_\_\_

First name: \_\_\_\_\_

Date of birth: (DD/MM/YYYY) \_\_\_\_\_

Nationality: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Country of residence: \_\_\_\_\_

Mobile phone: \_\_\_\_\_

Email address: \_\_\_\_\_

## 2. French Language Level

Mother Tongue:

To apply for the Bachelor de la Pâtisserie Français program at École Ducasse (ENSP Campus), applicants are required to demonstrate sufficient knowledge of French, as the course is taught in French. You may do so by meeting any one of the criteria below:

French is my mother tongue

I can provide an official test score and supporting documentation

DELFL Score: \_\_\_\_\_

Other certification (please specify provider and score)

Name of other provider: \_\_\_\_\_ score: \_\_\_\_\_

## 3. Academic Program

Please confirm your choice of program, by ticking the box below:

Bachelor de la Pâtisserie Française  
(duration 3 years, session taught in French)  
Starts in September 7, 2020

## 4. Medical History

If you have a learning difference or medical condition which means that you may require additional help during your studies, it is important to provide the following information which will be kept confidential and will not affect your academic eligibility to the School. Do any of the following apply to you?

Learning Differences (eg dyslexia, dysgraphia, dyscalculia, ADD, etc.)

Mobility/Hearing/Vision Given the nature of studies (practical, academic), please be aware that this could be an area where challenges may occur.

Medical needs: \_\_\_\_\_

Any other condition : \_\_\_\_\_

## 5. About the parent/legal guardian/emergency contact

Mr     Mrs

Languages spoken: \_\_\_\_\_

Family name: \_\_\_\_\_

First name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship with applicant: (you can tick more than one box)

Parent

Guardian

Emergency Contact

## 6. Application Fee

Your application is incomplete until you have paid the fee of 200€. Please click here to make the application fee payment [enspapp.flywire.com](https://enspapp.flywire.com).

# MOTIVATION LETTER

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## About you

Describe yourself and your interest in Pastry Arts (max 300 words):

Your reasons and motivation for joining this particular program (max 150 words):

## About your professional plans

Briefly explain your long-term career plans (max 150 words):

Present a feasible action plan to accomplish your goals (max 150 words):

Date (DD/MM/YYYY)

Name of applicant:

Signature of applicant:

## DATA PROTECTION

In accordance with data privacy regulations, we want you to be informed that any personal data provided on this application form will be treated with the sole purpose of assessing your application and, in case of being accepted, issuing your registration packet. Medical information will be used to ensure you are fit to start learning at École Ducasse – ENSP Campus or to make sure we can adjust our teaching methods accordingly or attend any special need during your stay such as allergies. Personal data will be stored within the legally stipulated periods and, for operational reasons and as is necessary and proportionate for intended purposes, may be transferred to École Ducasse – ENSP Campus' parent company: Sommet Education Sàrl (Switzerland) and its affiliates. At any given time, you may exercise your rights in data protection writing to [dpo@sommet-education.com](mailto:dpo@sommet-education.com).

## APPLICATION STATEMENT

By signing below, I understand that the information required is necessary to fulfill the purpose of the document and hereby declare that all information and attachments given on the application form are exact and complete.

Name, First Name: \_\_\_\_\_

Date: (DD/MM/YYYY) \_\_\_\_\_

Signature of applicant  
"Read and approved"

Signature of parent/legal guardian (if applicant is under 18 years old)  
«Read and approved»

Are you working with a representative of our school to support your application to École Ducasse?

Yes (please state below)      No

Name of the representative/company: \_\_\_\_\_

Location of the representative: \_\_\_\_\_

If a company, name of contact (if known): \_\_\_\_\_

Please send your completed and signed forms to [international.enrolment@ecoleducasse.com](mailto:international.enrolment@ecoleducasse.com) or send to your Education Counselor.



# LETTER OF COMMITMENT FROM FINANCIAL SPONSOR

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## SPONSOR DETAILS

Mr      Mrs

Family name: \_\_\_\_\_

First name: \_\_\_\_\_

Date of birth: (DD/MM/YYYY) \_\_\_\_\_ Nationality: \_\_\_\_\_

Postal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile phone: \_\_\_\_\_ Email: \_\_\_\_\_

Passport or ID number (please specify): \_\_\_\_\_

Relation to applicant: \_\_\_\_\_

I here by guarantee that I am capable of financing and commit to pay Mr/Ms

\_\_\_\_\_ studies at École Ducasse and all of his/her expenses. I understand that the fees and other financial conditions are modified once a year and accept their revision. I hereby declare to abide by the French law in case of a dispute related to the interpretation or the execution of my legal obligations towards École Ducasse and accept the exclusive competence of the French court.

Date (DD/MM/YYYY)

Signature:

\_\_\_\_\_

\_\_\_\_\_

In accordance with data privacy regulations we inform you that any personal data provided will be treated by École Ducasse with the sole purpose of managing the present commitment and the rights and obligations born from it. Your personal data will be stored within the legally stipulated periods. Your personal data may be transferred to our parent company: Sommet Education Sàrl in Switzerland and its affiliates, as well as to the government authorities for the purpose of delivery of your resident permit. Further information on how we use your personal data may be found at [www.lesroches.edu/legal-information](http://www.lesroches.edu/legal-information). At any given time, you may exercise your rights in data protection writing to [dpo@sommet-education.com](mailto:dpo@sommet-education.com). Please upload to the Online Application, or email to [info@lesroches.edu](mailto:info@lesroches.edu) or send to your Education Counselor.

# PARENTAL CONSENT AND DECLARATION

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Applicants who are below the age of 18 at the start date of the first semester must have their parent/legal guardian complete the form below.

Please include in your application submission, by emailing to [international.enrolment@coleducasse.com](mailto:international.enrolment@coleducasse.com) or send to your Education Counselor.

I, the undersigned: Parent Legal guardian

Family name: \_\_\_\_\_ First name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

I hereby declare that I have legal custody of the child:

Applicant's family name: \_\_\_\_\_

Applicant's first name: \_\_\_\_\_ Date of birth: (DD/MM/YYYY) \_\_\_\_\_

Postal Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

and I acknowledge that École Ducasse is an adult environment, and therefore I assume responsibility for the well-being and actions of the minor mentioned above. This general consent expressly also includes independent participation in voluntary activities and events organised by the school, including but not limited to general sports activities and/or events organised by the student body.

## Consent

With this general consent I agree to all communications and notifications from the school becoming effective by being addressed directly to the minor child listed above.

This consent will remain in effect until the minor child's 18th birthday.

Date (DD/MM/YYYY)

Signature of parent/legal guardian

\_\_\_\_\_

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INTERNATIONAL ASSISTANCE  
GET IN TOUCH WITH AN EDUCATION COUNSELOR

If you need help with your application, please do not hesitate to contact us. Our team will put you in touch with an education counselor or admissions adviser in your region.

ENSP Campus  
Château de Montbarnier  
43200 YSSINGEAUX, FRANCE  
[international.enrolment@ecoleducasse.com](mailto:international.enrolment@ecoleducasse.com)



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