



INSTITUT
POLYTECHNIQUE
DE PARIS



REQUEST TO COLLECT THE DIPLOMA ABROAD

I undersigned

DoB (date of Birth) : Location :

Address in the Country of Residence :

.....

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Phone : E-mail :

Request to be able to withdraw my national doctoral diploma from a French representation (embassy, consulate) in my country of residence, whose address I specify below:

City : Country :

Address :

.....

Contact within the French representation (usual cultural attaché or ACU)

Last and First Name:

Phone : E-mail :

Date Location

Signature du docteur ou de la docteure :

DOCUMENTS TO BE SUBMITTED:

Photocopy of both sides of a valid identity document of the holder of the diploma,

Copy of a document establishing your situation as a foreign resident and indicating your address (rental agreement for accommodation, electricity bill, etc.)

Request to collect the diploma from the French consulate or embassy abroad, dated and signed

BE AWARE that without these documents, no diploma will be issued