



TOP-LEVEL ATHLETE STUDENT INFORMATION SHEET

NAME :	SURNAME :				
Date of birth / /	Sex: M □ F □				
Home Address :					
Mobille: Email	l:				
Parents' address :					
Telephone:	Are you a scholarship holder? Yes No				
High School from:	Year:				
Series & Specialty					
Other training:					
If already enrolled at SUAD, Banner ID	:				
Major:					
SPORT:SPECIALITY:					
If you are on the National team lists, pleas	e specify your ranking:				
□ ELITE □ SENIOR □ YOUNG	☐ HOPE ☐ OTHER:				
DESIRED STUDIES 2023-2024					
PLEASE NOTE: You will have to register like other students					
TRAINING:					
➤ L1:					
► Other:					
roi atmetes. si	end your request to: sports@sorbonne.ae				
WISHE					
☐ Schedule adjustmen	staggering of studies				
☐ Support	Accommodation				

CONDITIONS OF SPORTS PRACTICE

Club Name:	F	Phone:		
Address:				
Coach's Name:		Phone:		
Training Location:				
Do you participate in training at	: National traini	ng center? YES	S 🗆 NO 🗆	
f so, name from The Coach.:				
Performances achieved in 2022/23 and dates:			Titles and dates :	
TRAINING SCHEDULE - Year 2023/2024 (if known) or 2022/2023				
Days	Timetables			

Sorbonne University Abu Dhabi

Secretariats of the Sports Department Contact: TLA@sorbonne.ae Sports Department Office Building 2

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