

NOM ET PRENOMS……………………………………………………………………………………………………………………………….

NIVEAU D’ETUDE………………………………………………………………………………………………………………………………….

NUMERO DE CARTE ETUDIANT…………………………………………………………………………………………………………….

DATE ET LIEU DE NAISSANCE………………………………………………………………………………………………………………..

TELEPHONE…………………………………………………...MAIL…………………………………………………………………………….

PARCOURS……………………………………………………………………………………………………………………………………………

FICHE PEDAGOGIQUE D’IDENTIFICATION DE L’ETUDIANT

|  |
| --- |
|  |

|  |
| --- |
|  |

ETUDIANT A TEMPS PLEIN TRAVAILLEUR A TEMPS PARTIEL FOURNIR ATTESTATION DE TRAVAIL

OPTION DE RECHERCHE A ENTOURER : 1 PHYSIQUE - 2 ENVIRONNEMENT- 3 ENVIRONNEMENT-SANTE -4 RURAL - 5 URBAINE- 6 POPULATION -7 PORT ET TRANSPORT MARITIME – 8 PECHE – 9 TOURISME.

|  |
| --- |
| LICENCE 1/FIP1 |
|  UE/UV | ANNEE ET SESSION | NOTE |
| GHE |  |  |
| GHE |  |  |
| GMO |  |  |
| GMO |  |  |
| GPE |  |  |
| GPE |  |  |
| HED |  |  |
| MRG |  |  |
| MRG |  |  |
| SIG |  |  |
| SIG |  |  |
|  |  |  |
| TOTAL CREDIT |  |  |

|  |
| --- |
| LICENCE 2/FIP2 |
|  UE/UV | ANNEE ET SESSION | NOTE |
| OEM  |  |  |
| MNE |  |  |
| GLM |  |  |
| SAC |  |  |
| TGC |  |  |
| ANG |  |  |
| INF |  |  |
| OES |  |  |
| MNE |  |  |
| MRI |  |  |
| SRC |  |  |
| IRG |  |  |
| ANG |  |  |
| STA |  |  |
| TOTAL CREDIT |  |  |

|  |
| --- |
| LICENCE 3 (GHE) |
|  UE/UV | ANNEE ET SESSION | NOTE |
| VDD |  |  |
| MPS |  |  |
| AEL |  |  |
| CSI |  |  |
| MRG |  |  |
| ANG |  |  |
| INF |  |  |
| GUR |  |  |
| DEM |  |  |
| GRU |  |  |
| TEL |  |  |
| MRG |  |  |
| ANG |  |  |
| STAT |  |  |
| TOTAL CREDIT |  |  |

|  |
| --- |
| MASTER 1  |
|  UE/UV | ANNEE ET SESSION | NOTE |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| TOTAL CREDIT |  |  |