



REGISTRATION FORM

THE STAR AND ITS PLANETARY SYSTEM IN THE WAKE OF COROT ADVANCES

Mrs Miss Mr.

First Name :

Last Name :

Email :

Degree and/or Title :

Main Field(s) of research :

Institute :

Address (Street, ZIP Code & City required, Country) :

Phone (International & Number) :

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Reason for participation :

(Your information given here is essential for the selection committee's decision)

►► Please contact Ecole Doctorale secretary (ecole-doctorale.astro@obspm.fr) for any inquiries.