



**MINISTRY OF EDUCATION AND CULTURE
THE GOVERNMENT OF THE REPUBLIC OF INDONESIA**

Jalan Jenderal Sudirman – Senayan

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**APPLICATION FORM
SCHOLARSHIP FOR DARMASISWA RI PROGRAM**

INSTRUCTIONS

Please answer each questions clearly and completely. Type or print in ink. Read carefully and follow all directions. If you more space, attach additional pages of the same size. Submit the completed form, duly signed, in three copies to the Indonesian Embassy/Diplomatic Representative in your country.

A. PERSONAL DETAILS

1. a. Family name : _____

b. First name : _____

2. Date of birth : _____

3. Place of birth : _____

4. Male/Female : _____

5. Nationality : _____

6. Religion : _____

7. Paspor Number : _____ Validity of : _____

8. E-mail : _____

9. a. Marital status : Single Married

b. Do you have a husband/wife or any dependants?

(Please give details of name, relationship and date of birth)

NO	NAME	RELATIONSHIP	AGE

affix photo here

4 x 6 cm

10. a. Employment (present)

_____	_____
_____	_____
_____	_____

b. Name and address of organization :

11. Person to be notified in Indonesia and in your country in case of emergency :

In your Country:	In Indonesia:
Name : _____	Name : _____
Address: _____	Address: _____
Relationship: _____	Relationship: _____

B. EDUCATION

Name and location of institution	Subject of study	Dates	Qualifications obtained

C. LANGUAGE: State proficiency Good-Fair-Elementary

SKILLS	Indonesian	English	Germany	French	Japan
Speaking					
Understanding					
Writing					

E. EMPLOYMENT DETAILS

YEARS	DESCRIPTIONS OF OCCUPATION	EMPLOYER

F. MISCELLANEOUS

List membership of professional societies and activities or public

List any significant publication you have written (do not attach)

Have you applied for any other scholarship: Yes No

Subject _____

Organization _____

Period from _____ to _____

Travel (List period spent away from your home country)

Country visited	Reason for visit or residence abroad	Dates
_____	_____	_____
_____	_____	_____

G. OTHERS
Experience abroad

No	Country	Purpose	Year

H. DECLARATION

If accepted for the scholarship, I agree;

1. to abide by the regulation of the university or college where I study
2. not changing either subject or place of study prior or upon arrival in Indonesia
3. not involve myself in any political activities during my study in Indonesia
4. not undertake any work for profit or gain during my study in Indonesia
5. to refrain myself from being pregnant and being involved in drug traffic and abuses
6. not travel out of Indonesia during the academic period and not travel out of Indonesia more than once
7. to fully responsible for my own luggage/goods if its lost prior or upon arrival in Indonesia. Have them in my hands custody.
8. to accept to be sent back to my country if I violate the said regulations and the stay permit regulation in Indonesia.

I certify that the statement I have made in response to the foregoing questions are true, Completed and correct to the best of my knowledge.

Date

Signature