



**MINISTRY OF NATIONAL EDUCATION  
THE GOVERNMENT OF THE REPUBLIC OF INDONESIA**  
Jalan Jenderal Sudirman – Senayan  
J A K A R T A 10270  
Telp/Fax: 62 - 021 5724707 (direct), 5738181, 5709445  
5711144 ext 2610

**APPLICATION FORM  
SCHOLARSHIP FOR MASTER DEGREE PROGRAM**

**INSTRUCTIONS**

Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions. If you need 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. Passport number : \_\_\_\_\_ Validity of : \_\_\_\_\_
8. 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)

affix photo here  
4 x 6 cm

NO	NAME	RELATIONSHIP	AGE

9. Permanent address in home country:

---



---

10. a. Employment (present):

---



---

b. Name and address of organization:

---



---

## B. EDUCATION

Name and Location of Institution	Subject of Study	Dates	Qualifications Obtain

## C. LANGUAGE: State proficiency Good – Fair – Elementary

SKILLS	Indonesian	English	Others
Speaking			
Understanding			
Writing			



**E. EMPLOYMENT DETAILS**

Years	Descriptions of Occupation	Employer

**F. OTHER**

Experience abroad

No.	Country	Purpose	Year

**G. DECLARATION**

If accepted for the scholarship, I agree:

1. to abide by the rules of the university or college
2. not changing either subject or place study prior or upon arrival in Indonesia
3. to refrain myself from political activities or any form of employment for profit or gain
4. not involve in any misconduct and any form of harassment
5. to refrain from being pregnant or being involved in drug traffic and abuses
6. to be sent back to home country if I violate the stay permit in Indonesia and the said regulations above.

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

---

---