



**MINISTRY OF NATIONAL EDUCATION**  
**THE GOVERNMENT OF THE REPUBLIC OF INDONESIA**  
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**APPLICATION FORM**  
**SCHOLARSHIP FOR DARMASISWA RI - PLUS 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 : \_\_\_\_\_ Valid to/until : \_\_\_\_\_
8. a. Marital Status :  Single  Married

affix photo here  
4 x 6 cm

b. Do you have a husband/wife or any dependants?  
(Please give details of name, relationship and date of birth)

NO	NAME	RELATIONSHIP	AGE

9. a. Employment (present)

_____	_____
_____	_____
_____	_____

b. Name and address of organization :

\_\_\_\_\_

\_\_\_\_\_

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

In Indonesia:	In you country:
Name:	Name:
Address:	Address:
Relationship:	Relationship:

**B. EDUCATION**

<b>Name and Location of Institution</b>	<b>Subject of Study</b>	<b>Dates</b>	<b>Qualifications Obtained</b>

**C. LANGUAGE: State proficiency Good-Fair-Elementary**

	<b>Indonesian</b>	<b>English</b>	<b>Germany</b>	<b>French</b>	<b>Japanese</b>
<b>Speaking</b>					
<b>Understanding</b>					
<b>Writing</b>					



**E. EMPLOYMENT DETAILS**

<b>Years</b>	<b>Description of Occupation</b>	<b>Employer</b>

**F. MISCELLANIOUS**

List membership of professional societies and activities or public

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

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Have you applied for any other scholarship                      Yes                      No

Subject                      \_\_\_\_\_

Organization                      \_\_\_\_\_

Period from                      \_\_\_\_\_

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 studying
2. not changing of my major and place of education institution where I'm studying, before or after arriving 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 accept to be sent back to my country if I violate the said regulation and the stay permit regulation in Indonesia.

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

\_\_\_\_\_

Date

\_\_\_\_\_

Signature