

## APPLICATION FORM – Community Development 2017 “Inclusive Growth in Indonesia – Empowering the Fishermen”

### PERSONAL INFORMATION

Full Name	
Gender	
Passport Number	
Passport Expiration Date	(dd-mm-yyyy)
Nationality	
Place of Birth	
Date of Birth	(dd-mm-yyyy)

### CONTACT INFORMATION

Email Address	
Phone Number	
Mailing Address	

### ACADEMIC INFORMATION

Major/Department/Faculty		GPA	
Semester/Year			
TOEFL/IELTS Score			

### HOME UNIVERSITY INFORMATION

Home University	
Contact Person	
Email	

### EMERGENCY CONTACT

Name	Mr./Mrs./Ms.
Relationship	
Address	
Phone Number	
Email Address	



### MEDICAL, DIETARY, OTHER INFORMATION

If you have any disability/limitation or medical condition that BINUS UNIVERSITY should be aware of, please specify here.	
If you have any allergies or special dietary requirement, please specify here.	
If you have ever been convicted of a crime offense, please specify here.	

### REQUIRED DOCUMENTS

Please attach copy of these documents together with your Application Form:

- Scan copy of passport (A4)
- Scan copy of academic transcript
- Scan copy of TOEFL/IELTS or other language proficiency certificate

### APPLICANT'S DECLARATION

I certify that my statements on the APPLICATION FORM – Community Development 2017 “Inclusive Growth in Indonesia – Empowering the Fishermen” are true, complete and correct to the best of my knowledge.

I fully understand that if I join, I agree:

1. To follow the community development “Inclusive Growth in Indonesia – Empowering the Fishermen” program and abide the rules of the institution in which I will undertake the program;
2. To act in such a manner that will not bring disrepute to myself, BINUS UNIVERSITY, home university or my country of citizenship during the program;
3. To abide the rules and regulations governing my visa;
4. To release information contained in this application form to relevant authorities;
5. That BINUS UNIVERSITY is not responsible for any aspects of my action during the period of the Program;
6. To allow BINUS UNIVERSITY to use photographs of myself which relate to this program, taken by BINUS UNIVERSITY or shared by me — the likely uses include but not limited to promotional materials (e.g. brochures, posters, newspaper articles, website, communication with educational agents, and advertising).

I am also aware of any medical condition (disability, illness or pregnancy), which might prevent me from completing my program within the time allowed.

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Full Name & Signature

#### Syahdan Campus

Jl. K H. Syahdan No. 9  
Kemangglisan - Palmerah  
Jakarta Barat 11480, Indonesia

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+6221 535 0660  
f. +6221 530 0244

#### Kijang Campus

Jl. Kemangglisan Ilir III No. 45  
Kemangglisan, Palmerah  
Jakarta Barat 11480, Indonesia

t. +6221 532 7630

#### Anggrek Campus

Jl. Kebon Jeruk Raya No. 27  
Kebon Jeruk, Jakarta Barat 11530  
Indonesia

t. +6221 53 69 69 69  
+6221 53 69 69 99  
f. +6221 530 0655

#### JWC Campus

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Senayan, Jakarta 10270  
Indonesia

t. +6221 720 2222  
+6221 720 3333 ext. 8100  
f. +6221 720 8569, 720 5555

#### Alam Sutera Campus

Jl. Jalur Sutera Barat Kav. 21  
Alam Sutera, Tangerang 15325  
Indonesia

t. +6221 53 69 69 19  
f. +6221 596 74042

