



Registration Form for Faculty of Nursing UI Internship Program (non-credit)

For applicants who are interest to apply for Faculty of Nursing UI Internship Program (non-credit), please fill the registration form below:

Personal Information

Program Date/Duration (From/ To) *	:	
Full Name	:	
Nick Name	:	
City of Origin	:	
Date of Birth	:	
Gender	:	
Nationality	:	
Position/title	:	
Home Address		
Street Address	:	
City	:	
State / Province / Region	:	
Postal/Zip Code	:	
Country	:	
Email	:	
Phone/Mobile	:	
Emergency Contact Information	:	
Passport number	:	
Please describe a little about yourself (also your hobbies or favorite activities)	:	

Education

Name of University	:	
University Address		
Street Address	:	
City	:	
State / Province / Region	:	
Contact Person at your University	:	
Phone	:	
Email	:	
Faculty/Major	:	
Class of/Year	:	
Language Proficiency	:	
other language ability	:	
Please Describe Your Academic Achievements & Experiences (Student Exchange Program, Study Abroad, Summer Program, Seminar, Conferences, Workshops, etc)	:	

Information Regarding Hospitality

Food Allergies	:	
Dietary/Religious Restrictions	:	
Favorite/preferred food	:	
Do you have travel/health insurance? Please mention	:	
Do you have any disease or illness? Please inform us if you are under specific medication	:	

Program Information

Have you ever been to Indonesia? If yes, when	:	
Please state first three things which come to your mind when you hear about Indonesia	:	
Please describe the reason to why you are interested in joining this program	:	
Do you have any specific places or things you want to do or see during the program?	:	
Is there any specific issues or topics you want to discuss during the program?	:	

Attachments

We kindly ask you to send these documents as follows:

1. Copy of Passport
2. Recommendation letter from your university/faculty
3. Scan of your English Proficiency test (for non-native speaker only)

Thank you for your participation. We will process your registration further. If you have any inquiries or questions regarding to this registration form, please contact us at :

kerjasamafikui@gmail.com