

**IN-COUNTRY INDONESIAN LANGUAGE COURSE
MONASH – UGM, YOGYAKARTA, INDONESIA
2010**

APPLICATION FORM

This application form should be completed and submitted with four passport sized photograph and the deposit (Aus\$300) to the General Office, School of Languages, Cultures, and Linguistics (S423, 4th floor, Menzies Building). **Please note:** deposit is to be paid by **cheque or money order** to be made **payable to Monash University, cash, credit card (Master Card, Visa), or EFTPOS** by 11th September, 2009

*General Office
School of Languages, Cultures, and Linguistics
Room S423, 4th Floor
Menzies Building
Monash University
Clayton Vic 3800
Ph (03)9905 2281 or 9905 2223*

Attach your photo here

1. Personal Profile

Family Name		Given Names	
Sex		Date of Birth	
Nationality <small>As shown on passport</small>		Place of Birth	
Marital Status		Student Number	
Home Address	Post code		
Contact Address <small>(If not the same as home address)</small>	Post code		
Contact Number in Australia	H:	W:	Mobile:
Contact number in Indonesia <small>If any</small>			Mobile:
Fax:			Email:

2. Passport Details

Nationality of the Passport		Place of Birth (As shown on passport)	
Date of Issue		Valid Until	
Passport Number		Any Restrictions	

3. Educational Background

Student ID:

(Monash student only)

Current Degree being Studies or Current Occupation		Course Code (Monash students only)	
Institution at Which Degree Being Completed and Current Year of Study		Current Indonesian Subject Code (Monash Indonesian students only)	
Previous Degree/Diplomas			
Highest Level of Indonesian Successfully Completed to Date (regardless of where studied)		Subject code (If studied at Monash)	

4. Details Relating to In-country programs

Level to be Undertaken in UGM (Please tick relevant box)	Beginners (Indonesian 1&2) <input type="checkbox"/>	Intermediate (Indonesian 3&4) <input type="checkbox"/>	Advanced (Indonesian 5&6) <input type="checkbox"/>	ISP (Indonesian 7&8) <input type="checkbox"/>	Other <input type="checkbox"/>
Program to be undertaken in UGM (Please tick relevant box)	6 Weeks Program <input type="checkbox"/>			Other <input type="checkbox"/>	
Subject Code to be enrolled in Consult your lecturer if you are not sure.	6-week program	INM2991 <input type="checkbox"/> INM3991 <input type="checkbox"/> INM4991 <input type="checkbox"/>	Other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Insurance cover by Please tick relevant box (s)	Monash <input type="checkbox"/> Policy No: _____	Private <input type="checkbox"/> Policy No: _____	Others <input type="checkbox"/> Details:		

5. Special Notes: (please write any special condition that we need to be aware, eg: certain health problem, vegetarian, vegan, etc)
