

SULTAN AGUNG ISLAMIC UNIVERSITY

INTERNATIONAL STUDENT ARRIVAL FORM

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

1. PERSONAL INFORMATION

|  |  |  |
| --- | --- | --- |
| Title: Dr, Mr, Mrs, Ms, Miss | Family name | Given name(s) |
|  |  |  |
| Date of Birth |  |  |  |  |  |  |  Gender | Male  |  | Female |  |

 day month year (please tick appropriate box)

|  |  |
| --- | --- |
| If you have previously been enrolled at UNISSULA please write your student ID number |  |

Area code Number

|  |  |
| --- | --- |
| Full Address (Current Address) | Telephone: day ( ) |
|  | Telephone: evening ( ) |
|  | Mobile: |
| Country | Post Code | Email: |
| INDONESIA |  |

1. Permanent Address in Home Country (if different from above)

|  |  |
| --- | --- |
| Full Address | Telephone: day ( ) |
|  | Telephone: evening ( ) |
|  | Mobile:  |
| Country | Postcode | Email: |
|  |  |

|  |  |
| --- | --- |
| Former name if applicable (eg maiden name) |  |

(NOTE: If qualifications were gained in former name, certification of name change must be provided.)

Do you have any other special needs or considerations that we should know about?

Yes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No

(Please attach further information indicating any special assistance you may require if applicable)

 3. CITIZENSHIP

|  |  |
| --- | --- |
| Country of Birth |  |
| Citizenship/Country of Passport |  |
| Passport Number |  |
| Visa Type |  Diplomatic Dependent Student Other(please specify) |
| Visa Number |  |
| Country of Permanent Residence |  |
| Have you applied for a Permanent Resident Visa to Australia | YES NO (changing your resident status may lead to refusal of your application or cancellation of your enrolment) |

4. English Language Proficiency

Type of test: (TOEFL/IELTS/TOEIC/OTHERS \_\_\_\_\_\_\_\_\_\_\_\_)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Date of test |  |  |  |  |  |  | Results = |
|  day month year |  |

5. Proposed Study

 Field of Research/Discipline (e.g. Australian History/History) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Project Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Project/Scholarship/Research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Duration of Project/Scholarship/Research: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sponsor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Organization Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Terms and Condition:

 UNISSULA community restrict any behavior related to alcohol within UNISSULA. All international students are personally responsible for their behavior, and therefore should, consider themselves responsible for the safety of themselves and all fellow students.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand UNISSULA’s alcohol policy, and hereby agree the above mentioned Terms and condition.

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