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| **Application for CommTECH Nusantara 2022**  |
| **Personal Information** |
| Full Name :  |
| Date of Birth: | Passport Number: |
|
| Institution / University : | Country of Citizenship: |
|
| □ Male | □ Female |   |   |   |   |   |
|   |   |   |   |   |
| Please describe your motivation to join this program: (please use additional paper if needed) |
| **NOTE:**  Please describe your motivation why do you want to join this program |
| **Current Mailing Address** |
| Street: |
|
| City: | State: | Zip/Postal Code: |
| Country: | Email: |
|
| Mobile Phone : | Telephone (Home) [Including area/country code]: |
| **Academic Information (only if you are a student)** |
| Degree : □ Bachelor □ Master □ Doctoral |
| Major: |
|
| Current Academic Status: |
| □ First Year □ Second Year □Third Year □ Fourth Year |
| **Institution Information (only if you are a lecturer /staff)** |
| Current Position: |
| Unit / Department / Faculty : |
| **Costs** |
| Course Fee | **□ USD 600****□ USD 450 (for ITS partner university)****□ (Additional fee of Airport Pick-up Service: USD 25)****\***Please check at your university whether your university have partnership with ITS |
| **Payment** |
| Please be sure to check the authorization box below: |  |  |  |  |   |
|   | □ **Wire transfer to**: |  |  |  |  |  |   |
|   |  |  |  |  |   |
|  | Account Number : 1400018161787Account Name : PT ITS Tekno SainsBank Name : PT Bank MandiriBank address : Kampus ITS Gedung Riset Center Lt. 2, Sukolilo, Keputih, Surabaya, Indonesia 60111Swift Box : BMRIIDJA |  |  |  |   |
|  |  |  |  |  |   |
|  |  |  |  |  |   |
|   | □**Transfer through Western Union to**: |
|   | Name: Cahyani Satiya Pratiwi |   |   |   |   |   |
|   | Address: Jl Kebonsari IV/22 A, Kecamatan : Jambangan, RT/RW. 02/02. |   |
|   | City : Surabaya Postal Code: Country : INDONESIA |  |   |
|   |   |   |   |   |
| **Academic/Professional Reference** |
| Please provide the name and contact information of your reference. |
| Last Name: | First Name: |
|
| Street: |
|
| City: | State: | Zip/Postal Code: |
| Phone: (including area/country code) | Email: |
|
| Occupation: | School/Faculty: |
| **Agreement** |   |   |   |   |   |
| I have read the program descriptions, including the application policies and procedures, and I feel that I would benefit from CommTECH program. I certify that all information I have provided in this form is correct and accurate to the best of my knowledge. |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | (If applicant is under 18 years old of age, parental approval is required.) |
|
|   |   |   |   |   | Date : |   |   |   |

**Notes:**

For those who want to join this program, **please send this registration form with**:

* Scanned Cover passport
* Scanned Biodata Passport
* Scanned students/staffs/lecturers I.D or statement letter that you are staff or lecturers from your university
* Formal photo with plain background (without glasses)
* Full Dose Vaccine Certificate

Please kindly pay attention that **once you are selected as participant of this program**, you will be asked for additional visa required documents, such as:

* Police clearance / criminal record letter
* Health certificate signed by doctor/physician

Please kindly send this application form and all documents mentioned above to **commtech@its.ac.id****.**

**Deadline:**

**July 15, 2022 - 12 AM GMT+7**

**CONTACT PERSON:**

*Mr. Emharis Gigih Pratama (Harris), MA*

*Mr. Muh. Wahyu Islami PM, S.T.*

*ITS Global Engagement*

*Institut Teknologi Sepuluh Nopember (ITS)*

*Global Kampong Building*

*Campus ITS Sukolilo Surabaya 60111, Indonesia*

*Telp/Fax : +62-31-5923411*

*Email*: commtech@its.ac.id / internationaloffice.its@gmail.com