

POSTGRADUATE SCHOOL

BRAWIJAYA UNIVERSITY

REGISTRATION FORM
DOCTORAL PROGRAM

Jl. Mayjend Haryono 169 Malang 65145
Telp. : 0341-571260 Fax. : 0341-580801
Email: ppsub@ub.ac.id
Home page : ppsub.ub.ac.id

THIS FORM CAN BE REPRODUCED BY YOURSELF



POSTGRADUATE SCHOOL
Brawijaya University

REGISTRATION FORM (S3)

1. Full name
2. Place and date of birth date. ☐☐ month ☐☐ year ☐☐
3. ID Number _____
4. Birth Mother's Name _____
5. Religion
6. Sex ☐ Man ☐ Woman
7. Blood Type ☐ A ☐ B ☐ O ☐ AB
8. Home Address

   Email. Phone Num.
9. Institution
10. NIP
11. Rank/title
12. Institution Address

    Phone Num.
13. Educational Experience

	College/University	Faculty	Major	Graduate date	GPA
S1					
S2					

14. Scientific Work ☐ Yes (attach) title ☐ No
15. Elective Study Program ☐ Environmental Science Doctoral Program
    ☐ Law Doctoral Program Interested in Resilience Studies
16. Study Specificity
17. Class ☐ Reguler 1 ☐ Reguler 2
18. Application Submission to Brawijaya University Postgraduate Program
    ☐ Never ☐ Once, in year
19. Academic Eligibility Recommendator

	Name	Position	Address
a.			
b.			
c.			

20. Source of fund ☐ Alone ☐ Institution ☐ BPPS
    ☐ Others, please specify

    ☐☐ - ☐☐ - 2023
21. Choose the Almamater and jacket size ☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ Other
22. You Know Interdisciplinary Postgraduate from

    ☐ ☐ ☐ ☐

Friend Social Media Website Other

Signature & Bright Name

Notes	:	-	Put a cross (X) on the appropriate option
		-	Write in block letters and preferably use black ink FL/S3/2019/01



POSTGRADUATE SCHOOL

Brawijaya University

ACADEMIC ELIGIBILITY RECOMMENDATIONS (S3)

1. Applicant Name
2. Study Program Interests
3. Study Specificity
4. Introduction to Applicants : - as a student during year
   - as a subordinate during year
   - as a colleague during year
5. Academic assessment of applicants to take part in educational programs

   Things that are considered powerful

   Things that are considered weak

6. In participating in an educational program, it is estimated that applicants will,
   - ☐ succeeded satisfactorily
   - ☐ competent enough to undertake education
   - ☐ requires special guidance to succeed
7. If there are problems related to the applicant's educational progress,
   - ☐ willing to give consideration
   - ☐ unwilling to give consideration
8. Recommender Identity

   Full name

   Position

   Address

   Phone number.

☐☐ - ☐☐ - 2023

Signature of Recommendatory

Notes :	-	Put a cross (X) for the appropriate choice
	-	Write in block letters using black ink and put in a closed envelope FL/S3/2019/02

POSTGRADUATE SCHOOL
Brawijaya University

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   - ☐ willing to give consideration
   - ☐ unwilling to give consideration
8. Recommender Identity

   Full name

   Position

   Address

   Phone number.

☐☐ - ☐☐ - 2023

Signature of the Recommender

Notes	:	-	Put a cross (X) for the appropriate choice
		-	Write in block letters using black ink and put in a closed envelope

POSTGRADUATE SCHOOL
Brawijaya University

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   Address

   Phone number.

☐☐ - ☐☐ - 2023

Signature of the Recommender

Notes :	-	Put a cross (X) for the appropriate choice
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POSTGRADUATE SCHOOL
Brawijaya University

ASSIGNMENT FOLLOWING S3 EDUCATION

The undersigned below :

Name
NIP
Position
Institution

Assigned to:

Name
NIP
Position
Institution

To take part in a postgraduate education program (S3) at the Brawijaya University Postgraduate Program.

To ensure the smooth running of activities while participating in the educational program, the person concerned is released from duties at the agency/institution.

☐☐ - ☐☐ - 2023

Signature & Bright Name

Notes	: - FL/S3/2019/05	Write in block letters and preferably use black ink

SCHOOLPOSTGRADUATE
Brawijaya University

STATEMENT REGARDING SOURCES OF FEES
POSTGRADUATE EDUCATION (S3)

The undersigned below :

Name
NIP
Position
Institution

Declare that, if I have been accepted as a doctoral student in the Brawijaya University Postgraduate Program for the 2023/2024 Academic Year then,

☐ I am willing to cover all educational costs while studying at the Brawijaya University Postgraduate Program

☐ My agency covers all educational costs while studying at the Brawijaya University Postgraduate Program

☐ All educational costs while studying at the Brawijaya University Postgraduate Program will be borne by the scholarship provider/sponsor

☐ I hope to get a scholarship from

☐☐ - ☐☐ - 2023

Approve
Chancellor/Head of Agency/Institution

Applicants,

Signature & Bright Name

Signature & Bright Name

Notes : - Put a cross (X) on the appropriate option
- Write in block letters and preferably use black ink FL/S3/2019/06

POSTGRADUATE SCHOOL
Brawijaya University

TPA & TOEFL STATEMENT LETTER

The undersigned below :

Name :.....

NO. Registration :.....

S2/S3 Study Program:.....

Tel No./ HP :.....

Address : .....

I hereby declare that I:

1. When registering, I (have/haven't)* attached TOEFL grades/scores from the UB Language Training Center/Institution recognized by UB as required by Universitas Brawijaya.
2. When registering, I (have/haven't)* attached the TPA grades/scores from OTO-Bappenas as required by Brawijaya University.

If within the specified time I am unable to fulfill these requirements, I am willing to accept academic sanctions.

Thus, this statement is made truthfully to be used properly.

Declare,

(.....)

Keterangan : *) Cross out thatit is not in accordance with
**)Registration for TPA (Academic Potential Test) OTO-Bappenas & TOEFL
You can contact the Brawijaya University Postgraduate Program
No. Tel. 0341-571260 Website: ppsub.ac.id

Notes	:	-	Put a cross (X) on the appropriate option
		-	Write in block letters and preferably use black ink FL/S2/2019/05