




INTERNATIONAL YOUTH EXCHANGE PROGRAM APPLICATION FORM 2023

Guide :

- a. Fill the form by using English
- b. Coloured the box (☐) of your choice by using bright red colour ()

1. Personal Information

| | | | |
|----------------|--|--|---|
| Photo 3x4 | Name | Full Name (Exactly the same as your passport/ID card) | |
| | | | |
| | Nickname (The name you like to be called) | | |
| | | | |
| Date of Birth | Day/Month/Year | Age | |
| Nationality | Indonesian | Sex | <input type="checkbox"/> M <input type="checkbox"/> F |
| Marital Status | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced | | |
| Religion | <input type="checkbox"/> Muslim <input type="checkbox"/> Protestantism <input type="checkbox"/> Catholicism <input type="checkbox"/> Hinduism <input type="checkbox"/> Buddhism <input type="checkbox"/> Confucianism | | |
| Mother Tongue | | | |

| | | | | |
|---|---|---|---|--|
| | | | | |
| | Department/Division/Office | | | |
| | | | | |
| | Year: | Position: | | |
| | 3. Name of Organization | Location (City, Province) | | |
| | | | | |
| | Department/Division/Office | | | |
| | | | | |
| Year: | Position: | | | |
| Language | Level of English | | Level of Other Language (.....) | |
| | Speaking : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Speaking : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| | Writing : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Writing : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| | Reading : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Reading : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| | TOEFL/IELTS Score* | | | |
| | <i>*Optional</i> | | | |
| | Level of Other Language (.....) | | Level of Other Language (.....) | |
| | Speaking : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Speaking : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| | Writing : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Writing : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| | Reading : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | | Reading : <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor | |
| 4. Achievements (Mention your best 3 achievements) | | * Fill in all columns and sections. Blank columns are not accepted | | |
| Name of achivement | Year | Brief Description | | |
| | | | | |

| | | |
|--|---|--------------------------|
| | | |
| | | |
| 5. Community Development (Mention your social contribution in recent 2 years) | * Add short explanations needed in the brief description (your role, purpose, impact, perimeter, stakeholder involved in your project, etc) | |
| Name of Community Development | Year | Brief Description |
| | | |
| | | |
| | | |
| 6. Skill and Ability | *Checklist on the type of skill which represents your ability, you can choose more than one. | |

| No | Skills | Yes | No |
|----|---|-----|----|
| 1 | Singing | | |
| 2 | Dancing | | |
| 3 | Playing Musical Instrument (Melody) | | |
| 4 | Playing Musical Instrument (Percussion) | | |
| 5 | Theatricals | | |
| 6 | MC / Host | | |
| 7 | Other: 1. 2. 3. | | |

Declaration

I hereby certify that the filling in and statements by myself in this form are true and correct. I am fully aware of my responsibilities as a participant. I will follow the guidelines given for this activity and will not hold the facilitators or the organization responsible for any untoward incident that I have caused or incurred.

Name and signature:

Date: / /