



Dinas Kepemudaan dan Keolahragaan Jawa Timur
 Bidang Pengembangan Kreativitas Pemuda
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PCMI JAWA TIMUR

PLEASE FILL THIS APPLICATION FORM BELOW USING COMPUTER - **HANDWRITING IS UNACCEPTABLE**

WRITE 1, 2, 3 OR 4 TO INDICATE YOUR PRIORITY TO THE FOLLOWING PROGRAMS

	Indonesia - Canada Youth Exchange Program (18-23 years old)	Attach a 4x6 size recent color photograph
	Indonesia - Australia Youth Exchange Program (20-25 years old)	
	Ship for South-East Asian Youth Program (SSEAYP) ASEAN - Japan (20-30 years old)	
	Indonesia - Korea Youth Exchange Program (22-27 years old)	
If there is a chance, I am willing to follow any program beyond programs mentioned above (YES)		

1. PERSONAL DATA

Full Name	:			
Address	:	City :	Postal Code :	
Place, Date of Birth	:			
Gender	:			
Tel (home)	:			
Tel (mobile / other)	:			
E-mail	:			
Interests / hobbies	:			
Dietary restriction (health and / or religious)	:	State (if any) dietary restriction (of food and / or beverage)		
Height (cm)	:		Weight (kg)	:
Shoe size	:			

2. **EDUCATIONAL BACKGROUND** (State the relevant GPA where applicable)

Date attended	Institution

3. **WORKING EXPERIENCE** (of the three most current)

Date attended	Companies / Institutions (provide contact details of your direct managers / supervisors)	Brief description of duties / responsibilities

4. **ACHIEVEMENT and AWARDS** (of five most significant ones)

Date awarded	Brief Remarks

5. **ORGANIZATIONAL EXPERIENCE** (of five most significant ones, including seminars/workshops, camps, trainings, etc.)

Date attended	Brief Remarks

6. FAMILY BACKGROUND

	Name	Address	Occupation
Father			
Mother			
Brother / sister			

7. FOREIGN-LANGUAGE SKILL

Items	Spoken	Written
English (please state your latest TOEFL score if applicable)	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent
Other (please specify)	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent
Other (please specify)	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent	<input type="checkbox"/> poor <input type="checkbox"/> fair <input type="checkbox"/> excellent

8. HAVE YOU EVER TRAVELED OVERSEAS BEFORE? (fill only where applicable)

No.	Country	Date	Purpose

9. CHARACTER DECLARATION

Have you ever been convicted of a crime or offence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been involve in any activity relating to drug abuse?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you willing to participate in any related test to prove your statement above?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

DECLARATION OF AUTHORIZATION

I certify that the statements made by me to the questions above are true, complete, and correct to the best of my knowledge and belief. Permission is given to the selection committee to make such investigations if necessary on the information given above. I understand that any misrepresentation or material omission made herein or in any other documents may lead but not limited to termination or dismissal of the program.

Full name: _____ Signature : _____

Date of application : _____