APPLICATION FORM

Suburb, town or city



Befor e submitting the Student Application Form, please ensur e you: Complete all relevant fields, sign and date, Print in BLOCK LETTERS and use either a BLACK or BLUE pen. Print X in the appropriate boxes. Carefully read and agree to all terms and conditions. Attach the following documentation (where required): a cretified copy of your photographic Photo her e identification, proof of citizenship, High School Certificate results, academic transcript and proof of course eligibility. Ensure you read the SAE Policies and Procedures Adhere to all tertiary admission guidelines for the Republic of Indonesia. Submit by post or email to the campus 1. Personal Details Please complete the following information as it appears on your current passport or photographic identification. Country Title Postcode / Zip Code First name Postal address Surname or family name Same as permanent residential address Other given name Address Previous name (if applicable) Suburb, town or city Date of birth State Male Female Country Please attach a certified copy of identificatio n Postcode Note: If applicable provide name change documents. 2. Contact Information Phone number (include country and area code if outside Indonesia) 4. Next of Kin (Emergency contact details) First Name Mobile number (include country and area code if outside Indonesia) Surname or family name Other contact number (include country and area code if outside Indonesia) Relation to applicant Fmail address Phone number (include country and area code if outside Indonesia) Mobile number (include country and area code if outside Indonesia) 3. Address Information Permanent residential address Email address Street Address I authorise SAE Indonesia to discuss academic and/or

administrative matters withe the person nominated above.

No

Yes

| 5. Parent/Guardian Details (If different from Next of Kin) | 7. Language |
|--|---|
| First Name | Do you speak a laguage other than english at home? |
| | No, English only |
| Surname or family name | Yes |
| Relation to applicant | Please specify |
| Telation to applicant | |
| Phone number (include country and area code if outside Indonesia) | How well do you speak English? |
| | Very well Well Not well Poorly Have you completed 2 or more years of study at a secondary or |
| Mobile number (include country and area code if outside Indonesia) | post-secondary education institute that primarily taught in the |
| | English language? |
| Email address | Yes: Please attach supporting documentation |
| | Note: All students must demonstrate English language proficiency sufficient to successfully complete the course |
| | by undergoing a personal interview plus written and verbal |
| I authorise SAE Indonesia to discuss academic and/or administrative matters with the person nominated above. | tests as part of the SAE enrolment process. |
| Yes No | |
| | 8. Secondary Education |
| 6. Citizenship and Residency | Have you completed or will you still be attending a level of secondary schooling in Indonesia before commencing at SAE Institute Indonesia? |
| 6.1 Are you an Indonesian citizen? | No, never attended school |
| Yes | Yes, completed or Yes, still at secondary school |
| No | Highest Grade Completed Year of Completion |
| Please Indicate your visa status | |
| I hold Permanent Resident status in Indonesia | Where was your permanent residence during your final year? |
| I hold a Student Visa for Indonesia | Town or City |
| I hold Social Visit Visa for Indonesia | Postcode |
| I am going to apply for a visa | |
| For what country do you hold primary citizenship? | |
| | Please provide a certified copy of your Senior Secondary Certificate or Education completion results |
| Which country will you be in during your visa application? | |
| | |
| | 9. Previous Study at SAE Institute |
| 6.2 Were you born in Indonesia? Yes | Have you previously studied at SAE Institute? |
| | No |
| ☐ No — | Yes — |
| What country were you born in? | At which campus did you study? |
| What year did you arrive in Indonesia? | |
| What year did you arrive in madricular: | Course studied |
| | |
| | |
| | If you are applying for credit towards your course, please attach a certified copy of your academic transcripts. |
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| 10. Highest Educational Attainment | 13. Disabilities |
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| What is your highest attempetd qualification? (please specify by ticking 'C' if qualification was Complete or 'I' if Incomplete.) | What best Do you have any dissabilties, impairments or long-term medical condition that may affect your studies? |
| C I Certificate I C I Diploma (or Associate Diploma) | No |
| C I Certificate II C I Advanced Diploma or associate Degree | Please indicate the ar eas of impairment |
| C I Certificate III (or Trade C I Bachelor Degree | Hearing Mobility/Physical Medical |
| C I Certificate IV (or Advanced Certificate/Technician C I Post graduate qualification (e.g. Masters or PhD) | Intellectual Learning Vision |
| Other | Mental illness Acquired Brain Other (Please |
| Please specify | Impairment Describe |
| | |
| Studied at (Name of provider) | 14. Academic Credit |
| | Will you be applying for Recognition of Prior Learning (RPL), Direct Credit |
| What was your last year of participation/completion? | Transfer (DCT) or Advanced Standing? No Yes: Please request the application form from SAE |
| 11. Employment | 15. Scholarship |
| What best describes your current employment status? | Will you be applying for scholarship ? |
| Full-time employee Employed - unpaid worker in a family business | No Yes: Please request the application form from SAE |
| Part-time or Casual employee Unemployed - not seeking employment | |
| Self employed not employing Unemployed - seeking part time work | 16. Agent (International students only) |
| Employer Unemployed - seeking full-time work | Are you using an education or migration agent to assist with your application or visa process? |
| Who was your latest employer | No |
| What was your position and main duties? | Yes — |
| what was your position and main duties: | Agency Name |
| | |
| | Agency location (City ,Country) |
| 12. Study Reason | Repr esentative's name |
| What best describe your reason for wanting to study? | |
| To get a job Was a requirement for my job | Repr esentative's email addr ess |
| Develop existing business Wanted extra skills for my job | |
| Start my own business Got into another course | |
| Personal interect or | |
| Try for a different career self-development | |
| Get a better job/promotion Other reason | |
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| 17. Course Selection |
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| 17.1 What course are you applying for? |
| Full course name |
| |
| Concentration (if applicable) Course code (if known) |
| |
| 17.2 What campus would you like to study at? |
| Jakarta |
| 17.3 Intake commencement date? |
| |
| 17.3 What payment method would you prefer? |
| Diploma & Degree |
| Upfront Payment Instalment payments |
| Certificate |
| Upfront Payment Instalment payments |
| Payment Information: Payments can be made by direct transfer or by cash at SAE. If you wish to pay by direct transfer, please make your payment to Yayasan Next Akademi, BCA Menara Karya-Kuningan Jakarta, Account No: 217-3125526 Swift Code: Cenaidja. Transfer charges have to be paid by the sender. Full Payment must be received no later than 5 days prior to start dates. |
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| 18. Declaration |
| By signing this application you: |
| Declare that: |
| You are seeking admission as a fee-paying student for education purpose only; You will be responsible for the full costs of the program for which you are seeking admission and for your travel and living cost; |
| You have read the instructions on this application form and the information provided by you in this application is true and complete; |
| You have read and understood the SAE Student Handbook and Student Policies |
| Authorise SAE Indonesia: Send electronic communication and information relating to your application; |
| Release personal information relevant to your application and visa documentations to: your nominated authorised SAE Agent, relevant government(s) |
| and their agencies; associated SAE Group Institutes, companies, or their agents; |
| Contact any persons, institutions, companies or entities mentioned in this application in order to verify claims made by you; Use your image, name and course work in any of its marketing materials. |
| Understand that: |
| The documents submitted for your application become the property of Yayasan Next Akademi; |
| SAE Indonesia may reverse any decision made on the basis of incorrect or incomplete information provided by you; |
| SAE Indonesia reserves the right to inspect and verify the originals of supplied documents; Giving false or misleading information is a serious offence under the Indonesian Law. |
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| Applicant's signature |
| |
| |
| Date |
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| Parent/Guardian declaration for applicants under 18 |
| As the legal parent or guardian, I hereby give permission for the applicant to attend the course outlined in section 17. I have read and understood the declarations |
| outlined on this application and acknowledge that where the applicant has no legal obligation as a minor I will take resposibility for any repercussions. |
| Parent/Guardian's full name and signature |
| |
| |
| Date |
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