TRAINING COURSES APPLICATION FORM

SAE INDONESIA

AKADEMI KOMUNIKASI

Affix photograph here

PERSONAL DETAILS OF APPLICANT (to be fully completed)

Surname		Given Names	
Name as will appear on certificate		Gender	Male ☐ Female ☐
Address			
Postcode/ZIP		Country	
Telephone / Home		Previous School	
Telephone / Mobile		Email	
Nationality		Date of Birth	
Contact in Emergency		Emergency Telephone	
Father's Name		Mother's Name	
Father's Address		Mother's Address	

COURSE INFORMATION (to be fully completed)

Course Name	
Course Code	
Commencement Date	
Course Type	

PAYMENT METHOD

Registration Fee	
Course Fee	
Total Fee	
Payment Method	

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.

OTHER IMPORTANT INFORMATION (to be fully completed)

Will you require a study visa?	Yes ☐ No ☐
Have you transferred money into the SAE bank account? If yes please provide details?	
If someone is sponsoring your course, please give the name of the person/organisation.	
Do you have a disability ? If yes, please provide details (on separate sheet if necessary).	

DECLARATION BY THE APPLICANT (to be fully completed)

I have read and understood all the terms and conditions of enrolment set out on the reverse side of this form, under 'General Information', in the current SAE brochures and handbooks and I agree to abide by these terms and conditions. The applicant herewith grants the College the right to use his/ her name, picture and course work for promotional materials for the purpose of promoting SAE and its programmes.

Signature of Applicant or Sponsor (Parent or Guardian if applicant is younger than 16 years. In that case please print name as well)	Date	Place

For Office Use Only

Amount	Date received	Receipt Nr	Course start date	Course end date	SAE signature