**ASEA-UNINET Joint Program for Inbound Staff Mobility 2019**

 **Registration Form**

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| **Personal Information** |
| Last Name: | First Name: |
|
| Date of Birth: □ Male  □ Female  | Passport Number: |
|
| Institution / University: | Country of Citizenship: |
|
| Please describe your motivation to join this program:  |
| **Current Mailing Address** |
| Street: |
|
| City: | State: | Zip/Postal Code: |
| Country: | Email: |
|
| Mobile Phone: | Telephone (Home) [Including area/country code]: |
| **Emergency Contact Information** |
| Last Name: | First Name: |
|
| Street: |
|
| City: | State: | Zip/Postal Code: |
|
| Country: | Phone [including area/country code]: |
|
| Email: |
| **Professional Information**  |
| Title: □ Prof.Dr. □ Doctor □ Mr □ Mrs □ Ms |
| Designation/Responsibility: |
|
| **International Travel Plan (You can fill further details later)** |
| Date of Arrival: dd/ mm/ yy l Flight Number: |
|  |
| **Additional Information** |
| Food which you are allergic: |
| Restricted Food:  |
| Phobia: |
| the chosen Hotel in Surabaya:Check in date:Check out date:the chosen Hotel in Bali:Check in date:Check out date:  |
| Domestic flight from Surabaya to BaliAirline:Flight number:**Note**: All participants are expected to arrive in Surabaya on September 9, 2019, and depart from Bali on September 16, 2019, or onwards. |
| **Agreement** |   |   |   |   |   |
| I have read the program description and agree to follow all agenda as written in the ASEA-UNINET Joint Program for Inbound Staff Mobility 2019. I certify that all information I have provided in this form is correct and accurate to the best of my knowledge. |
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|   |   |   |   |   | Date : |   |   |   |

Please send this registration form with:

* Scanned passport
* Nomination letter from your university

***Please complete the registration before July 15, 2019***

***CONTACT PERSON:***

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**Rectorate Building 1st Floor**

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