



Department of Education

Balai Bahasa Indonesia Perth (Inc) in collaboration with the Consulate General of the Republic of Indonesia Western Australia, and Department of Education Western Australia

APPLICATION FORM
Indonesian Language Assistant Program of Western Australia
January - December 2017

Before filling in this interactive form, make sure you have read the [LAP Guidelines 2017](#). These can be found at www.balaibahasaperth.org/language-assistant-program or <http://kjri-perth.org.au>

Follow all directions in the LAP Guidelines 2017 when completing and submitting your application via email.

Each section of this application form must be completed.

Type in the spaces provided, save a copy and email together with the supporting documents listed in the Guidelines to lap@balaibahasaperth.org .

Please make absolutely sure that your contact details will be current until the end of year 2016.

I. PERSONAL DETAILS

a. Name:

b. Email:

c. NIP/No. Reg:

d. Place/ Date of Birth:

e. Male/Female:

f. Occupation:

g. Current Address:

City:

Post Code:

h. Mobile phone:

i. Marital Status:

Single

Married

j. Hobbies/Favourite pastimes:

II. EDUCATION

Name	S-1	S-2	S-3
Name of University			
Year			
Faculty			
Major			
Thesis			
Index Cumulative (IPK)			

III. EMPLOYMENT DETAILS

Year	Position	Employer
2016		
2015		

IV. LANGUAGE

No Language level

1 English

Good

Fair

Elementary

IELTS Score: Date:

TOEFL Score: Date:

2 Other Languages:

V. Professional development (Seminars/Courses/Training)

No	Course	Institution	Place	Date
1				
2				
3				
4				
5				

Use this space to add any additional professional development that may be relevant:

VI. Social Activities

No	Organisations	Positions	Years
1			
2			
3			
4			
5			

VII. Persons to be notified in Indonesia in case of emergency:

Name:

Relationship:

Address:

Telephone:

Email:

Use this space to add additional information you may wish the selection panel to consider:

VIII. Declarations

If accepted for the Program, I agree to:

Abide by the regulations of the Department of Education of Western Australia.

Accept to work outside the city of Perth during the program, as required.

Actively promote Indonesian language and cultures in Western Australian Schools.

Accept responsibility for my daily financial requirements (e.g. accommodation, food, clothing, utilities and other necessary expenses) during the program.

I certify that the statements I have made in response to the foregoing questions are true, completed and correct to the best my knowledge.

Date

Signature

Applications close **Thursday 30 June 2016**