



**UPH**  
UNIVERSITAS PELITA HARAPAN

**APPLICATION FORM**  
Undergraduate Students

/ Academic Year 2019/2020  
Universitas Pelita Harapan

# **New Student Application Form**

## 2019/2020

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 E-mail\* : \_\_\_\_\_  
 Surat Elektronik

\*Please fill out your active e-mail address. Your e-mail address will be used as main communication media.

\*Mohon untuk mengisi alamat surat elektronik aktif anda. Surat elektronik anda akan digunakan sebagai media komunikasi utama.

**please fill with capital letter**  
 silahkan isi dengan huruf besar

**PERSONAL INFORMATION / DATA PRIBADI**

 First Name\* : \_\_\_\_\_  
 Nama Depan

 Middle Name : \_\_\_\_\_  
 Nama Tengah

 Last Name\* : \_\_\_\_\_  
 Nama Belakang

 Gender\* :  Male  Female  
 Jenis Kelamin Pria Wanita

 Marital Status\* :  Single  Married  
 Status Pernikahan Belum Menikah Menikah

 Place of Birth\* : \_\_\_\_\_ Date of Birth\* : \_\_ / \_\_ / \_\_\_\_ (dd/mm/yyyy)  
 Tempat Lahir Tanggal Lahir

 NIK\* : \_\_\_\_\_  
 Nomor Induk Kependudukan (NIK)

 Citizenship\* : \_\_\_\_\_  
 Kewarganegaraan  
 PASSPORT Number (For Foreigner)\* : \_\_\_\_\_ Expired Date\* : \_\_\_\_\_  
 Nomor Passpor Masa Berlaku

 Religion\* :  Christian  Catholic  Islam  Buddhism  Hinduism  Confucianism  
 Agama Kristen Katolik Islam Budha Hindu Konghuchu

 if you are Christian/Catholic, please fill the following information  
 Jika Anda beragama Kristen/Katolik, harap isi keterangan berikut

 Church Name\* : \_\_\_\_\_  
 Nama Gereja

**CONTACT INFORMATION / INFORMASI KONTAK**

 Current Address\* : \_\_\_\_\_  
 Alamat Sekarang


 RT : \_\_\_\_\_ RW : \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Kode pos

 Districts : \_\_\_\_\_ Region : \_\_\_\_\_  
 Kelurahan Kecamatan


 City\* : \_\_\_\_\_ Province\* : \_\_\_\_\_  
 Kota Provinsi

 Country\* : \_\_\_\_\_  
 Negara

 Home Phone Number : \_\_\_\_\_  
 Nomor Telepon Rumah

 Mobile Phone Number : \_\_\_\_\_  
 Nomor Telepon Genggam

 LINE ID : \_\_\_\_\_  
 ID LINE

 WhatsApp : \_\_\_\_\_  
 Nomor WhatsApp

 I Prefer to be contacted by :  E-mail  Phone  WhatsApp  LINE  
 Saya lebih memilih untuk dihubungi melalui

**CAMPUS LOCATION PREFERENCES**

**MEDAN**

**SURABAYA**

**LIPPO VILLAGE**

\*Choose only one your preferred campus location  
 Pilih salah satu kampus tujuan anda

Junior High School Name\* : \_\_\_\_\_ Graduation Year: \_\_\_\_\_  
 Nama Sekolah SMP Tahun Lulus















Senior High School Name\* : \_\_\_\_\_  
 Nama Sekolah SMA

City : \_\_\_\_\_  
 Kota : \_\_\_\_\_  
 State : \_\_\_\_\_  
 Provinsi : \_\_\_\_\_  
 Country : \_\_\_\_\_  
 Negara : \_\_\_\_\_

School Type\* :  SMA  SMK  Homeschooling/PKBM  
 Jenis Sekolah

Final Certificate\* :  UN  Paket C / Equivalency Letter Graduation Year: \_\_\_\_\_  
 Ijazah Akhir Tahun Lulus

**AVAILABLE MAJORS**

Medicine   Kedokteran LV 	Applied Mathematics Matematika Terapan LV 	Biotechnology   Biologi LV 	Electrical Engineering Teknik Elektro LV 	Industrial Engineering Teknik Industri LV 
Civil Engineering Teknik Sipil LV 	Food Technology Teknologi Pangan LV 	Accounting International Akuntansi Internasional LV M 	Management International Manajemen Internasional LV M 	Law International Hukum Internasional LV 
Law   Ilmu Hukum LV M S	Hospitality Management Manajemen Perhotelan LV M 	Hospitality Management Manajemen Perhotelan S 	Applied Comm. Sciences Ilmu Komunikasi LV	International Relations Hubungan Internasional LV
Music   Ilmu Seni Musik LV	Psychology   Psikologi LV	Architecture   Arsitektur LV	Visual Comm. Design Desain Komunikasi Visual LV	Interior Design Desain Interior LV
Product Design Desain Produk LV	Travel Industry Manajemen Usaha Wisata LV 	Management   Manajemen LV M S	Accounting   Akuntansi LV M S	Information System Sistem Informasi LV M
Informatics Teknik Informatika LV M	Applied Comm. Sciences PJJ Ilmu Komunikasi LV (Online Learning)	Pharmacy   Farmasi LV 		

 Only Eligible for IPA Major on Highschool  English Class Only  Available for English Class  Concentration under Management Major

**M - Medan Campus**      **S - Surabaya Campus**      **LV - Lippo Village Campus**

Preference Major\*: \_\_\_\_\_  
 Jurusan yang dipilih

Entry Option\*  Regular  Scholarship  
 Jalur Masuk *Reguler* *Beasiswa*

Scholarship Type	Lippo Village	Medan	Surabaya
<b>Academic</b>	✓	✓	✓
<b>Sport</b>	✓	—	✓
<b>Financial Aid</b>	✓	✓	✓

Class Session  Morning  Evening  
 Sesi Kelas *Pagi* *Sore*  
 (Only for Medan Campus/Hanya Berlaku di Kampus UPH Medan)

Apply for English Class: [ ] YES. If YES, Please input your English Test Score below. Except for Medan Campus, you ARE NOT required to submit English Test Score  
 [ ] NO  
 Mendaftar Kelas Inggris: [ ] YA. Jika YA, mohon masukkan Nilai Tes Inggris di bawah. Kecuali Kampus Medan, TIDAK PERLU memberikan Nilai Tes Inggris.  
 [ ] Tidak.

English Test Score:  TOEFL IBT: \_\_\_\_\_  TOEFL PBT: \_\_\_\_\_  IELTS: \_\_\_\_\_  UPH EAT: \_\_\_\_\_  
 Nilai Test Inggris

**MOTHER DATA (GUARDIAN 1) / DATA IBU (WALI 1)**

 First Name : \_\_\_\_\_ Last Name : \_\_\_\_\_  
 Nama Depan Nama Belakang


 Religion\* :  Christian  Catholic  Islam  Buddhism  Hinduism  Confucianism  
 Agama Kristen Katolik Islam Budha Hindu Konghuchu


 Last Education :  Graduate  Undergraduate  Diploma  Senior High School  
 Pendidikan terakhir S2 S1 Diploma SMA  
 Junior High School  Others : \_\_\_\_\_  
 SMP Lainnya

 Occupation : \_\_\_\_\_  
 Pekerjaan

 Same Address as Applicant?  Yes  No **if NOT, please fill in your Mother's current address**  
 Alamat sama dengan pendaftar Ya Tidak **Jika TIDAK, silahkan isi dengan alamat Ibu Anda saat ini**

 Current Address : \_\_\_\_\_  
 Alamat Sekarang  
 RT : \_\_\_\_\_ RW : \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Kode pos  
 Districts : \_\_\_\_\_ Region : \_\_\_\_\_  
 Kelurahan Kecamatan  
 City : \_\_\_\_\_ Province : \_\_\_\_\_  
 Kota Provinsi  
 Country : \_\_\_\_\_  
 Negara

 Home Phone Number : \_\_\_\_\_ E-mail : \_\_\_\_\_  
 Nomor Telepon Rumah

 Mobile Phone Number : \_\_\_\_\_ WhatsApp Connected:  YES  NO  
 Nomor Telepon Genggam Terkoneksi aplikasi WhatsApp Ya Tidak

 NIK\* : \_\_\_\_\_  
 Nomor Induk Kependudukan (NIK) \*For Indonesian Citizen/Khusus WNI
**FATHER DATA (GUARDIAN 2) / DATA AYAH(WALI 2)**

 First Name : \_\_\_\_\_ Last Name : \_\_\_\_\_  
 Nama Depan Nama Belakang


 Religion\* :  Christian  Catholic  Islam  Buddhism  Hinduism  Confucianism  
 Agama Kristen Katolik Islam Budha Hindu Konghuchu


 Last Education :  Graduate  Undergraduate  Diploma  Senior High School  
 Pendidikan terakhir S2 S1 Diploma SMA  
 Junior High School  Others : \_\_\_\_\_  
 SMP Lainnya

 Occupation : \_\_\_\_\_  
 Pekerjaan

 Same Address as Applicant?  Yes  No **if NOT, please fill in your Father's current address**  
 Alamat sama dengan pendaftar Ya Tidak **Jika TIDAK, silahkan isi dengan alamat Ibu Anda saat ini**

 Current Address : \_\_\_\_\_  
 Alamat Sekarang  
 RT : \_\_\_\_\_ RW : \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Kode pos  
 Districts : \_\_\_\_\_ Region : \_\_\_\_\_  
 Kelurahan Kecamatan  
 City : \_\_\_\_\_ Province : \_\_\_\_\_  
 Kota Provinsi  
 Country : \_\_\_\_\_  
 Negara

 Home Phone Number : \_\_\_\_\_ E-mail : \_\_\_\_\_  
 Nomor Telepon Rumah

 Mobile Phone Number : \_\_\_\_\_ WhatsApp Connected:  YES  NO  
 Nomor Telepon Genggam Terkoneksi aplikasi WhatsApp Ya Tidak

 NIK\* : \_\_\_\_\_  
 Nomor Induk Kependudukan (NIK) \*For Indonesian Citizen/Khusus WNI

# Admission Requirements for All Majors

**IMPORTANT!**
**Penting!**

\*All prospective student have to be graduated or on progress to graduate from year 12/from education equivalent to year 12 level when applying.

Seluruh calon mahasiswa wajib sudah lulus atau akan lulus dari kelas 12/tingkat pendidikan setara dengan kelas 12 ketika mendaftar.

**ONLY FOREIGN STUDENT:**

Registration is not valid using this application form. Visit [one.uph.edu](http://one.uph.edu) to start online registration.

**KHUSUS CALON MAHASISWA WNA:**

Pendaftaran TIDAK dapat menggunakan formulir pendaftaran ini. Kunjungi [one.uph.edu](http://one.uph.edu) untuk memulai pendaftaran online.

NO	DOCUMENT TO SUBMIT
1	A legalized copy of academic record Grade 10 (Semester 1 & 2) and Grade 11 (Semester 1 & 2) <i>1 Fotokopi rapor Kelas 10 (Semester 1 &amp; 2) &amp; kelas 11 (Semester 1 &amp; 2) yang dilegalisir</i>
2	A Legalized copy of Junior High School National Examination <i>1 Fotokopi SKHUN SMP yang dilegalisir</i>
3	A copy of valid ID Card: KK (Family Registration Card)/Passport for Foreigner <i>1 Fotokopi KK (Kartu Keluarga) / Paspur untuk WNA</i>
4	A Recent photo size 3x4 with Red Background <i>1 Lembar Pas Foto ukuran 3x4 dengan latar belakang merah</i>
5	Admission Statement and Drug-Free Statement (See Page 17-18) <i>Formulir pernyataan admisi dan keterangan bebas narkoba (lihat hal. 17-18)</i>
6	1 Copy of TOEFL (71 for IBT/500 for PBT) or IELTS with 5.5 score band for Foreign Applicant <i>1 Fotokopi hasil TOEFL (71 IBT/500 PBT) atau IELTS dengan skor 5.5 untuk WNA</i>

NO	MAJORS	ADDITIONAL REQUIREMENTS FOR SPECIFIC MAJOR
1	International Class <i>Kelas Internasional</i>	1 Copy of TOEFL (61 for IBT/ 500 for PBT) or IELTS with 6 score band <i>1 Fotokopi hasil TOEFL (61 IBT/ 500 PBT) atau IELTS dengan skor 6</i>
2	School of Design <i>Fakultas Desain</i>	<ul style="list-style-type: none"> <li>• School Of Design Application Form <i>Formulir Pendaftaran Fakultas Desain</i></li> <li>• 4 (Four) Hand Drawings <i>4 (Empat) Gambar tangan sesuai dengan persyaratan</i></li> <li>• Color Blindness Test from an oculist or registered hospitals/clinics <i>Hasil tes buta warna dari dokter spesialis mata atau dari rumah sakit/klinik yang terdaftar</i></li> <li>• A typed 500 Words Essay (A hand writing essay is not acceptable) <i>Esai 500 kata yang diketik (Esai dengan tulisan tangan tidak dapat diterima)</i></li> </ul>
3	Conservatory of Music <i>Fakultas Ilmu Seni</i>	<ul style="list-style-type: none"> <li>• Conservatory Of Music Application Form <i>Form pendaftaran Fakultas Ilmu Seni</i></li> <li>• A good quality DVD/VCD recording which refer to website <i>DVD/ VCD Rekaman dengan kualitas yang baik sesuai dengan persyaratan di website Fakultas Ilmu Seni</i></li> <li>• Conservatory Of Music Recommendation form <i>Form rekomendasi Fakultas Ilmu Seni</i></li> </ul>
4	Faculty of Medicine <i>Fakultas Kedokteran</i>	<ul style="list-style-type: none"> <li>• Faculty Of Medicine Application Form and Health Declaration Form) <i>Form pendaftaran Fakultas Kedokteran dan Form Pernyataan Sehat</i></li> <li>• Color Blindness Test from an oculist <i>Hasil tes buta warna dari dokter spesialis mata</i></li> <li>• 500 Words Essay <i>Essay 500 kata</i></li> </ul>
5	Faculty Psychology <i>Fakultas Psikologi</i>	Psychology Form (Only for Lippo Village Campus, see page 7) <i>Form pendaftaran Fakultas Psikologi (Hanya untuk Kampus Lippo Village, lihat hal. 7)</i>

## Additional Requirements for Scholarship

NO	DOCUMENT TO SUBMIT	ACADEMIC ACHIEVEMENT	SPORT ACHIEVEMENT	FINANCIAL AID
1	Scholarship Application Form (see page 15) <i>Form Pendaftaran Beasiswa (lihat hal. 15)</i>	✓	✓	✓
2	A-500-word English Essay about: "Why I Choose X Major at UPH as a Stepping Stone for My Career" (Except School of Design and Faculty of Medicine) <i>Essay 500 kata tentang: Mengapa saya memilih program studi X sebagai Batu Loncatan untuk karir saya (kecuali Fakultas Desain &amp; Kedokteran)</i>	✓	✓	✓
3	Copy of Achievement Certificate in any fields <i>Fotokopi Sertifikat Prestasi (semua bidang)</i>	✓	✓	✓
4	A statement letter of family financial condition, issued by: Church (for Christian/Catholic) or RT/RW/Kelurahan (for other religions) <i>Surat keterangan tidak mampu dari Gereja (Untuk yang beragama Kristen/Katholik) atau RT/RW/Kelurahan untuk agama lain</i>	-	-	✓
5	A Copy of your parent's tax form for the last one year <i>1 Fotokopi SPT Ayah/Wali satu tahun terakhir</i>	-	-	✓
6	Sport Scholarship Recommendation Form (see page 16) <i>Form pendaftaran beasiswa jalur olahraga (Lihat hal. 16)</i>	-	✓	-
7	Recent photo (postcard size) wearing team uniform (write your name, height and weight behind the photo) <i>1 Lembar foto terbaru ukuran (ukuran kartu pos) menggunakan seragam tim (Tuliskan nama, berat dan tinggi badan di belakang foto)</i>	-	✓	-
8	Recent Photo (Postcard Size) wearing school uniform <i>1 Lembar foto terbaru (ukuran kartu pos) menggunakan seragam sekolah</i>	✓	-	✓
9	Copy of Sports Certificate of Performance (province/national/international level) <i>Fotokopi sertifikat pencapaian olahraga (Tingkat Provinsi, Nasional, Internasional)</i>	-	✓	-
10	Recommendation Letter from Komite Olahraga Nasional Indonesia (KONI) <i>Surat Rekomendasi dari Komite Olahraga Nasional Indonesia (KONI)</i>	-	✓	-

### Re-Registration

Complete and submit all requirements listed in Re-registration form to Registrar Office.

Re-registration form is available on website.

Lippo Village & Medan on 1 July - 31 July 2019

Surabaya on May & July 2019

### PENDAFTARAN ULANG

Lengkapi dan serahkan seluruh persyaratan dokumen yang tertera di Formulir Pendaftaran Ulang kepada Registrar Office

Formulir Pendaftaran Ulang tersedia di laman UPH

Lippo Village & Medan pada 1 Juli - 31 Juli 2019

Surabaya dilakukan pada bulan Mei & Juli 2019

# Admission Test Regulations

## BEFORE THE TEST

1. Participant is required to wear proper attire and shoes.
2. Participant is required to bring their own stationery (pen, 2B pencil, pencil sharpener, eraser, and calculator), Admission Test Participant Card and original ID card (KTP/Passport/driving license/student ID card). Participant who does not bring the requirements must report to the Admission Test Committee.
3. Admission Test time:
  - Medan : 14:00 WIB – End
  - Surabaya : 08:00 WIB – End
  - Lippo Village : 08:00 WIB – End

## SEBELUM UJIAN BERLANGSUNG

1. Peserta wajib berpakaian rapi, sopan, dan bersepatu tertutup.
2. Peserta wajib membawa alat tulis (pena, pensil 2B, rautan pensil, penghapus, dan kalkulator) milik sendiri, Kartu Tanda Peserta Ujian Saringan Masuk, dan kartu identitas asli (KTP/Paspor/SIM/Kartu Pelajar). Peserta yang tidak membawa perlengkapan tersebut wajib melapor kepada panitia Ujian Saringan Masuk.
3. Waktu USM:
  - Medan : 14:00 WIB – End
  - Surabaya : 08:00 WIB – End
  - Lippo Village : 08:00 WIB – End

## DURING THE TEST

1. Participant is prohibited to interact with other participants.
2. Participant is not allowed to leave the test room without permission from the supervisor.
3. Participant must stop doing the test when there is a time up notification.
4. Participants will be disqualified and their registration process will be cancelled should they breach any of the Admission Test Regulation.
5. Admission Test for Medicine will be conducted in English.

## SELAMA UJIAN BERLANGSUNG

1. Peserta dilarang berinteraksi dengan peserta lain.
2. Peserta dilarang meninggalkan tempat ujian tanpa izin pengawas.
3. Peserta wajib menghentikan pekerjaannya setelah ada pemberitahuan bahwa waktu ujian telah berakhir.
4. Peserta akan dianggap gugur dan dibatalkan proses pendaftarannya jika melanggar tata tertib Ujian Saringan Masuk.
5. Soal ujian saringan masuk untuk Fakultas Kedokteran dalam bahasa Inggris.

## IMPORTANT!

- Participants must not cheat during the Admission Test under any conditions. If UPH finds out later that the participant has cheated on the test, then the participant will be terminated from UPH and no fees will be refunded.
- Interview session for Medical student candidate will be held on Wednesday & Thursday, one week after the Admission Test.

## PENTING!

- Peserta dilarang melakukan kecurangan saat Ujian Saringan Masuk. Apabila pada kemudian hari diketahui bahwa mahasiswa aktif telah melakukan kecurangan saat ujian saringan masuk, mahasiswa yang bersangkutan akan dikeluarkan dari UPH tanpa ada pengembalian biaya kuliah yang telah dibayarkan.
- Sesi wawancara untuk calon mahasiswa Kedokteran akan diadakan pada hari Rabu & Kamis, 1 minggu setelah ujian.



## Faculty of Psychology Application Form

I, the undersigned:

*Saya yang bertanda tangan di bawah ini:*

Form Number <i>Nomor Formulir</i>	:	<input type="text"/>
Full Name <i>Nama Lengkap</i>	:	<input type="text"/>
Phone/Mobile Number <i>Nomor Telepon</i>	:	<input type="text"/>
E-mail address <i>Alamat e-mail</i>	:	<input type="text"/>

*I certify that the above information is true and correct*

*Saya menyatakan bahwa informasi di atas adalah benar.*

I hereby acknowledge and agree to follow the teaching and learning process in the Faculty of Psychology UPH with the exposure and mastery of the science of Psychology from various ideas and methods, and also have an integral understanding of human being from the perspective of Psychology based on Biblical Christian Worldview within the framework of Reformed Theology.

I am fully aware that there will be a personal counseling session as a prerequisite to continuing the teaching and learning process in the next term (2nd term).

*Saya mengetahui dan menyetujui untuk mengikuti pembelajaran di Fakultas Psikologi UPH dengan pemaparan dan penguasaan ilmu Psikologi dari berbagai pemikiran dan metode, sekaligus memiliki pemahaman yang utuh tentang manusia dari sudut pandang Psikologi yang berdasarkan wawasan Kristen Alkitabiah di dalam kerangka Teologi Reformed.*

*Saya menyadari sepenuhnya bahwa akan ada konseling pribadi sebagai prasyarat untuk melanjutkan pembelajaran pada term berikutnya (term 2)*

\_\_\_\_\_,  
Place | *Tempat*

\_\_\_\_\_,  
Date | *Tanggal*

\_\_\_\_\_  
Prospective Student's Signature & Full Name  
*Tanda Tangan & Nama Lengkap Calon Mahasiswa*





# Faculty of Medicine Application Form

Form Number :   
*Kode Registrasi*

Full Name :   
*Nama Lengkap*

Name of Family Doctor :   
*Nama Dokter Keluarga*

NO	ADDITIONAL REQUIREMENTS FOR FACULTY OF MEDICINE
1	Color Blindness Test Certificate by Ophthalmologist / Oculist
2	A 500 word English Essay about "Why I am Interested in Medicine and How I Will Use It to Provide Good Health Care for the People of Indonesia in the Future."
3	2 Recent Photo size 3x4 using white collared shirt with blue background

**COMMUNITY INVOLVEMENT**

Please provide a brief summary of all volunteering, caring, community leadership, religious services and organizations that you have participated in.  
*Jelaskan secara singkat semua bentuk partisipasi Anda pada kegiatan relawan, kepemimpinan, pelayanan keagamaan dan organisasi.*

**PERSONAL ACHIEVEMENT**

Please provide a brief summary of your current sports, artistic activities, hobbies, and interests.  
*Jelaskan secara singkat tentang kegiatan olahraga, seni, hobi, dan minat Anda saat ini.*

By signing this form, I agree to abide by the regulation stated by Faculty of Medicine, both now and in the future. This include all activities and examination that may be held outside of Monday to Friday.

*Dengan menandatangani formulir ini, saya bersedia menaati peraturan yang telah diberlakukan dan akan diberlakukan oleh Fakultas Kedokteran. Hal ini mencakup semua kegiatan dan ujian yang mungkin diadakan diluar hari Senin hingga Jumat.*

Prospective Student,  
*Calon Mahasiswa*

\_\_\_\_\_, \_\_\_\_\_  
 Place | Tempat                      Date | Tanggal

\_\_\_\_\_  
 Prospective Student's Signature & Full Name  
*Tanda Tangan & Nama Lengkap Calon Mahasiswa*

# Health Declaration Form

You will be required to complete the "Health Declaration Form" prior to join for your classes. The information provided to us is confidential and will not be used for any other purposes except providing support for the student.

*Anda wajib melengkapi "Formulir Pernyataan Kesehatan" sebelum bergabung di dalam kelas. Informasi yang diberikan kepada kami bersifat rahasia dan tidak akan digunakan untuk tujuan lain kecuali memberikan dukungan bagi siswa.*

I, the undersigned:

Saya yang bertanda tangan di bawah ini:

Full Name :  
 Nama Lengkap

NO	HEALTH DECLARATION/PERNYATAAN	YES/ YA	NO/ TIDAK	DETAILS/ KETERANGAN
1	Do you have, or have you ever had, any medical conditions or operations in the past 5 years? <i>Apakah Anda memiliki atau pernah memiliki kondisi medis tertentu atau pernah menjalani operasi dalam 5 tahun terakhir?</i>			
2	Are you at present attending a doctor for medical care, taking any medication or on a waiting list for hospital assessment or treatment? <i>Apakah Anda saat ini sedang akan menjalani perawatan medis, mengkonsumsi obat-obatan?</i>			
3	Do you have impairment/disability (physical or mental) or specific learning disability which may affect your ability to study in UPH Medical School? <i>Apakah Anda memiliki kekurangan/cacat (fisik atau mental) atau ketidakmampuan belajar yang dapat mempengaruhi proses belajar Anda di Fakultas Kedokteran UPH?</i>			
4	Have you ever suffered from tuberculosis (TB) within the past 12 months? <i>Apakah Anda pernah menderita tuberkulosis (TB) dalam 12 bulan terakhir?</i>			
5	Has any family member or close contact been treated for TB? <i>Apakah ada anggota keluarga atau orang di sekitar Anda yang pernah dirawat karena TBC?</i>			
6	Have you had a cough for more than 3 weeks? <i>Apakah Anda menderita batuk lebih dari 3 minggu?</i>			
7	Have you coughed up blood? <i>Apakah Anda pernah batuk berdarah?</i>			
8	Have you had any unexplained weight loss? <i>Apakah Anda pernah kehilangan berat badan tanpa sebab yang dapat dijelaskan?</i>			
9	Have you suffered from night sweats or fever? <i>Apakah Anda menderita demam atau keringat berlebih saat tidur?</i>			
10	Have you ever had any kind of back, joint or muscle problem? <i>Apakah Anda mengalami sakit punggung, sendi atau masalah otot?</i>			
11	Have you ever had, Dermatitis, Eczema, Psoriasis or any other skin condition? <i>Apakah Anda pernah mengalami: Dermatitis, Eksim, Psoriasis atau penyakit kulit lainnya?</i>			
12	Have you ever had any mental illness which might affect your ability to study and practice medical science? (including anxiety, depression, self-harm, eating disorders, psychological or emotional problems) <i>Pernahkah Anda punya penyakit mental yang berpotensi mempengaruhi kemampuan Anda dalam belajar dan mempraktekkan ilmu medis?</i>			
13	Have you ever had a drug, tobacco, nicotine or alcohol problem? <i>Apakah Anda pernah memiliki masalah yang terkait dengan narkoba, tembakau, nikotin atau alkohol?</i>			
14	Do you have any difficulty with your eyesight, including color blindness? <i>Apakah Anda memiliki kesulitan dengan penglihatan Anda, termasuk buta warna?</i>			
15	Do you have difficulty in hearing? <i>Apakah Anda memiliki kesulitan pendengaran?</i>			
16	Have you ever suffered from any of the following: loss of consciousness including fainting attacks, blackouts or epilepsy? <i>Pernahkah Anda menderita kehilangan kesadaran termasuk pingsan atau pingsan karena epilepsi?</i>			
17	Have you ever suffered from any of the following: heart disease, diabetes, Hypertension or any other medical illness? <i>Pernahkah Anda pernah mengalami; penyakit jantung, diabetes, Hipertensi atau penyakit medis lainnya?</i>			
18	Have you ever suffered from chest or lung problems: Asthma, Bronchitis? <i>Apakah Anda pernah mengalami masalah paru-paru: Asma, atau Bronchitis?</i>			
19	Have you ever had any allergies, including to drugs, food or latex? <i>Pernahkah Anda punya alergi, termasuk alergi terhadap obat-obatan, makanan atau lateks?</i>			
20	Have you ever received treatment for bowel or gastric problems? <i>Apakah Anda menerima perawatan karena masalah usus atau lambung?</i>			
21	Do you have any other medical conditions not previously mentioned in questions 1 - 15 above? <i>Apakah Anda pernah mengalami masalah kesehatan lainnya yang tidak disebutkan pada pertanyaan 1 - 15?</i>			
22	Have you been vaccinated for Hepatitis? If you have, what was the dosage? <i>Apakah Anda pernah mendapat vaksin Hepatitis? Jika ya, berapa dosisnya?</i>			
23	Have you had any episode of Jaundice/Hepatitis? If yes, please submit the Laboratory Blood Report. If you already committed, you have to submit the Laboratory Blood Report to FK Admission Office, FK Building 2nd fl, on August 1-10 2018 during weekdays. <i>Apakah Anda pernah menderita Hepatitis? Jika ya, harap mengirimkan Hasil Periksa Darah dari laboratorium ke kantor Administrasi FK, Gedung FK Lt.2, pada tanggal 1-10 Agustus 2018 di hari kerja.</i>			

I certify that the above information is true and correct, and if in the future a false or incorrect statement is found, I am willing to accept the consequences.

*Saya tegaskan informasi diatas adalah benar, dan apabila di kemudian hari ditemukan kekeliruan atau pernyataan yang tidak benar, saya bersedia menerima konsekuensinya.*

Medical School New Student,  
 Mahasiswa Baru Fakultas Kedokteran

Prospective Student's Signature & Full Name  
 Tanda Tangan & Nama Lengkap Calon Mahasiswa

# Conservatory of Music Application Form

**NOTES**

1. Check the admission requirement and procedure at <http://music.uph.edu>
2. Applicants for all concentrations have to submit a good quality DVD/VCD recording which refer to website.
3. Applicants may be asked to take a Music Placement Test (Music Theory and Solfeggio).
4. The Recommendation form (p.12) must be completed by the referee.

Form Number :

Nomor Formulir

Full Name :

Nama Lengkap

NO	ADDITIONAL REQUIREMENTS FOR CONSERVATORY OF MUSIC
1	For procedure and audition requirements (include sample of Theory and Solfeggio Exam), please see <a href="http://music.uph.edu">http://music.uph.edu</a>

PRIMARY INSTRUMENT / INSTRUMEN UTAMA (Choose only one / pilih salah satu)				
<input type="checkbox"/> Piano (Classical)	<input type="checkbox"/> Viola	<input type="checkbox"/> Flute	<input type="checkbox"/> Trumpet	<input type="checkbox"/> Piano Contemporer
<input type="checkbox"/> Vocal (Classical)	<input type="checkbox"/> Cello	<input type="checkbox"/> Oboe	<input type="checkbox"/> French Horn	<input type="checkbox"/> Vocal Contemporer
<input type="checkbox"/> Guitar (Classical)	<input type="checkbox"/> Contrabass	<input type="checkbox"/> Clarinet	<input type="checkbox"/> Trombone	<input type="checkbox"/> Electric Guitar
<input type="checkbox"/> Violin		<input type="checkbox"/> Bassoon	<input type="checkbox"/> Tuba	<input type="checkbox"/> Electric Bass
		<input type="checkbox"/> Saxophone	<input type="checkbox"/> Percussion	<input type="checkbox"/> Drums

SECONDARY INSTRUMENT / INSTRUMEN KEDUA	
What secondary instrument (s) do you play or wish to play other than the major instrument selected above? <i>Instrumen kedua apa yang anda mainkan atau ingin pelajari selain instrumen pilihan utama di atas?</i>	
How long have you been learning the secondary instrument? <i>Berapa lama anda sudah belajar instrumen kedua tersebut?</i>	

CHOOSE THREE CONCENTRATIONS, MARK 1-3 FROM THE MOST PREFERED ONE	
<input type="checkbox"/> Classical Music Performance	<input type="checkbox"/> Music Therapy
<input type="checkbox"/> Jazz & Pop Music Performance	<input type="checkbox"/> Performing Arts Production & Management
<input type="checkbox"/> Music Composition	<input type="checkbox"/> Sound Design & Music Production
<input type="checkbox"/> Music Education	

Resume (A4 Paper, Fonts 12, Space 1.5)
In separate document, please provide your resume / CV. Your resume should include: <b>Section I (Musical Experience)</b> - The name(s) of your current private teachers. Include the dates you studied with them, and their contact information. - A list of any music performance and/or competitions in which you participated and all award or recognition you have received. - A list of any music related achievements; including leading ensembles, arranging, organizing event, teaching music, etc. <b>Section II (Non-Music Experience)</b> - A list of academic activities and awards in your high school - A list of any community service or ministry in which you have participated; What particular role did you play? - A list of any of any other creative works you have accomplished aside from the musical ones above.

Essay/Personal Statement (500-700 words, A4 Paper, Fonts 12, Space 1.5)
In separate paper write an essay addressing these questions: 1. Why do you want to pursue music as your vocation? Why do you choose the particular concentration(s) mentioned above? 2. Tell us important figure, particular music, particular situation/experience, or certain quotes that have special meaning to you. How has it influenced you? 3. Martin Luther once wrote: "Next to the Word of God, music deserves the highest praise. The gift of language combined with the gift of song was given to man that he should proclaim the Word of God through Music." Tell us about your dream, about your vision in life; what do you want to accomplish through music?

RECOMMENDATION LETTERS (See Recommendation Form, page. 12)
For all applicants, <b>two</b> letters of recommendation are required. Recommendation letter should come from someone who knows the applicant well academically and musically (Music/Instrument Teacher, High School Teacher).



## Conservatory of Music Recommendation Form

### Referee / Pemberi Rekomendasi

Full Name :   
*Nama Lengkap*

Institution/School of Music :   
*Nama Sekolah Musik*

Phone Number :   
*Nomor Telepon*

Mobile Phone :   
*Nomor Handphone*

Length of Courses :  Year  
*Lama Belajar Tahun*      Frequency/week :       Hours/Course :   
*Frekuensi/minggu Jam/Kelas*

Please circle the most appropriate answer based on prospective student's music skill.  
*Silahkan lingkari pilihan yang sesuai dengan opini Anda mengenai keterampilan musik Calon Mahasiswa berdasarkan keterampilan musik calon mahasiswa*

- |  |   |
|--|---|
| <p>1. Technical strength in playing the instrument:</p> <ul style="list-style-type: none"> <li>a. Solid</li> <li>b. Need supervision to be solid</li> <li>c. Difficult to be solid</li> </ul> <p>2. Musical strength in playing the instrument:</p> <ul style="list-style-type: none"> <li>a. Sensitive and able to perform an outstanding musical showing diligence to do the work</li> <li>b. sensitive yet need guidance</li> <li>c. less sensitive</li> </ul> <p>3. Knowledge of Theory of Music</p> <ul style="list-style-type: none"> <li>a. Very Good in making harmony using S-A-T-B format</li> <li>b. Know basic format in writing S-A-T-B</li> <li>c. Doesn't have a deep knowledge in theory of music</li> </ul> <p>4. Knowledge about aural training</p> <ul style="list-style-type: none"> <li>a. Well trained in <i>soffegio/prima vista</i> for example: rhythmic dictation, melody, interval, and harmony</li> <li>b. Has sufficient session in aural training but only before the examination period.</li> <li>c. Haven't received aural training yet</li> </ul> <p>5. Knowledge about history of music</p> <ul style="list-style-type: none"> <li>a. Has interest in learning the history of music as well as background of songs that he/she is playing</li> <li>b. Has sufficient guidance</li> <li>c. Never received any guidance</li> </ul> | <p>6. Level of diligence</p> <ul style="list-style-type: none"> <li>a. Show a great enthusiasm to learn his/her musical pieces</li> <li>b. Has ambition to develop his/her musical ability yet less consistent</li> <li>c. Depends on mood, always need support to gain motivation and inspiration</li> </ul> <p>7. Level of speed to grasp knowledge</p> <ul style="list-style-type: none"> <li>a. Shows rapid development in a short amount of time</li> <li>b. Not too fast in showing diligence to do the work ability by his/her own initiative</li> <li>c. Not too fast and less careful over the given correction not too fast and less careful over the given correction</li> </ul> <p>8. Your opinion about the maturity of your student</p> <ul style="list-style-type: none"> <li>a. Mature</li> <li>b. Quite mature</li> <li>c. Immature</li> </ul> <p>9. Level of confidence to see your student will be able to succeed studying at UPH Conservatory of Music with his/her chosen rhythmic dictation, melody, interval, and harmony concentration</p> <ul style="list-style-type: none"> <li>a. Very sure 80%-100%</li> <li>b. Sure 60%-80%</li> <li>c. Unsure 50%-60%</li> </ul> <p>10. Your consideration for the student to get scholarship</p> <ul style="list-style-type: none"> <li>a. Highly recommended</li> <li>b. Recommended</li> <li>c. Less recommended</li> </ul> |
|--|---|

**REFeree COMMENTS REGARDING SCHOLARSHIP APPLICANT / Komentor Pemberi Rekomendasi Mengenai Pemohon**

I certify that the above information is true and correct.  
*Saya tegaskan informasi diatas adalah benar.*

Referee,  
 Pemberi Rekomendasi

\_\_\_\_\_, \_\_\_\_\_  
 Place | Tempat , Date | Tanggal

\_\_\_\_\_  
 Referee's Signature & Full Name + Stamp (if any)  
 Tanda Tangan & Nama Lengkap Pemberi Rekomendasi + Cap (jika ada)



# School of Design Application Form

Form Number :

Nomor Formulir :

Full Name :

Nama Lengkap :

**Preferred Major | Jurusan Pilihan | Please give tick (✓) in your option | Silahkan berikan tanda (✓) dalam pilihan Anda**

- Architecture | *Arsitek*
 Product Design | *Desain Produk*  
 Interior Design | *Desain Interior*
 Visual Communication Design | *Desain Komunikasi Visual*

## Additional Requirements /

NO	DOCUMENT
1	<p><b>One Page Essay General Thinking Assessment</b> (1 page A4, line spacing 1,5, size 12 font)</p> <p><i>Please write an essay answering these questions below.</i>  <i>Tuliskan sebuah essay untuk menjawab pertanyaan pertanyaan dibawah ini.</i></p> <p><b>A. Why do you choose this program? Write what you have learned about Architecture/ Product Design/ Interior Design/ Visual Communication Design that makes you decide that this is something that you are called to do.</b>  <i>Apa alasan anda untuk memilih program ini? Tuliskan apa yang sudah anda pelajari mengenai Arsitektur/ Desain produk/ Desain Interior/ Desain Komunikasi Visual yang membuat anda mengambil keputusan bahwa anda terpenggil untuk menekuni bidang ini.</i></p> <p><b>B. What have you done to prepare yourself for this program? Explain any preparation that you have done to learn and prepare yourself for this program.</b>  <i>Apa yang telah anda lakukan untuk mempersiapkan diri untuk program ini? Jelaskan berbagai persiapan yang telah anda lakukan untuk mempelajari dan mempersiapkan diri bagi program ini.</i></p> <p><b>C. Please mention at least 2 great Artist/ Architect/ Designer that bring great impact to the field you are interested with, explain how their work influenced you. These should be individuals who have brought relevance to the world or to you in some social, political, emotional, economic, or other meaningful context. Explain why you feel they are important. In what ways do you want your own work as designer/ architect to contribute to or make a difference in the community?</b>  <i>Sebutkan setidaknya 2 Seniman besar/ arsitek/ desainer yang mempengaruhi bidang yang ingin anda tekuni, jelaskan bagaimana karya mereka mempengaruhi anda. Kedua tokoh ini haruslah mereka yang relevan bagi dunia dan anda sendiri, dan berdampak besar secara sosial, politik, emosional, atau ranah lain. Jelaskan mengapa anda merasa karya mereka penting, dan apa yang anda sendiri ingin capai sebagai arsitek/ desainer untuk berkontribusi dan membawa perbedaan dalam masyarakat.</i></p>
2	<p><b>Color Blindness Test Certificate by Ophthalmologist / Oculist</b>  <i>Sertifikat tidak buta warna dari Spesialis Mata</i></p>
3	<p><b>Technique/ Composition/ Skill Assessment (A3 size drawing paper, total 4 drawings)</b></p> <p><b>(2 pcs. A3 Drawings)</b></p> <p><b>A. Draw people or human figure/ partial human body interacting with an object (gadget, home objects, furniture, automotive etc.), set within a scene or place (room, outdoor scene, building, street, etc.). Use your preferred technique and tools (pencil, paint, mixed media etc.)</b>  <i>Gambarkan sekelompok orang atau figur manusia atau bagian tubuh manusia yang sedang berinteraksi dengan sebuah objek (gadget, perlengkapan rumah, furnitur, otomotif dsb.), yang ditempatkan dalam sebuah adegan atau tempat (misal: ruangan, di luar ruangan, bangunan, jalan raya, dsb.). Gunakan teknik dan alat yang anda kuasai (pensil, cat, mixed media dsb.)</i></p> <p><b>(2 pcs. A3 Drawings)</b></p> <p><b>B. Draw object/ building / interior space (freehand sketches or perspective) using your any media (pencil, paint, marker). 1 drawing that includes some shading techniques to demonstrate light and dark elements. 1 drawing that use colors.</b>  <i>Gambarkan sebuah objek/ bangunan/ ruang interior (sketsa tangan atau perspektif) menggunakan alat yang anda pilih (pensil, cat, marker). Sertakan 1 gambar dengan teknik arsiran untuk mendemonstrasikan efek terang dan gelap. 1 gambar menggunakan warna.</i></p>

Place | Tempat , Date | Tanggal

Prospective Student's Signature & Full Name  
 Tanda Tangan & Nama Lengkap Calon Mahasiswa





# Scholarship Application Form

Scholarship application for all categories

### Scholarship Category/Kategori Beasiswa

Please tick (✓) your option - Choose one only

- Academic Achievement | *Prestasi Akademik*
- Financial Aid | *Bantuan Finansial*
- Sport Achievement | *Prestasi Olahraga*

I, the undersigned:

*Saya yang bertanda tangan di bawah ini:*

Form Number :   
*Nomor Formulir*

Full Name :   
*Nama Lengkap*

### Social Organization Or Leadership Activities / *Aktivitas Sosial, Organisasi Atau Kepemimpinan*

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Student Council   OSIS                    | <input type="checkbox"/> Band   Orchestra   Orkes                          | <input type="checkbox"/> Scout   Pramuka               |
| <input type="checkbox"/> Red Cross Youth Council   PMR             | <input type="checkbox"/> Language Club   Klub Bahasa                       | <input type="checkbox"/> Flag-Raising Squad   Paskibra |
| <input type="checkbox"/> Sport   Olahraga                          | <input type="checkbox"/> Spiritual Activities   <i>Aktivitas Spiritual</i> | <input type="checkbox"/> Others   <i>Lainnya</i> _____ |
| <input type="checkbox"/> Choir   Vocal Group   <i>Paduan Suara</i> | <input type="checkbox"/> Martial Arts   <i>Ilmu Bela Diri</i>              |  |

### Achievements (Senior High School Level) / *Penghargaan yang pernah diperoleh (di tingkat SMA)*

(Please attach certificate that support this information)  
*(Lampirkan fotokopi sertifikat sebagai bukti yang mendukung informasi ini)*

### Religious Activities at Church / *Aktivitas Keagamaan di Gereja*

If you are Christian/Catholic  
*Jika Anda beragama Kristen/Katolik*

I certify that the above information is true and correct.  
*Saya menyatakan bahwa informasi diatas adalah benar.*

Place | *Tempat* \_\_\_\_\_ Date | *Tanggal* \_\_\_\_\_

Prospective Student's Signature & Full Name  
*Tanda Tangan & Nama Lengkap Calon Mahasiswa*

Parent/Guardian's Signature & Full Name  
*Tanda Tangan & Nama Lengkap Orang Tua/Wali*



# Sport Scholarship Recommendation Form

## Scholarship application for sport achievement category /

I, the undersigned:

*Saya yang bertanda tangan di bawah ini:*

Coach/Teacher Full Name :   
*Nama lengkap Pelatih/Guru*

High School/Institution Name :   
*Nama Sekolah/Institusi*

### Sport (Lippo Village Campus)

Coach  
*Pelatih*

Basketball Basket    Swimming Renang    Volleyball Voli    Badminton Bulu Tangkis    Soccer Sepak Bola    Futsal Futsal

### Sport (Surabaya Campus)

Coach  
*Pelatih*

Basketball Basket

Please recommend this prospective student regarding his/her scholarship application:

*Mohon untuk merekomendasikan Calon Mahasiswa ini pada pendaftaran Program Beasiswa:*

Form Number :   
*Nomor Formulir*

Full Name :   
*Nama Lengkap*

Height :  cm      Weight :  kg  
*Tinggi Badan      Berat Badan*

Position in Team : 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
*Posisi pada Tim*

I certify that the above information is true and correct.

*Saya tegaskan informasi diatas adalah benar.*

Coach/Teacher,  
*Pelatih/Guru*

\_\_\_\_\_, \_\_\_\_\_  
Place | *Tempat*      Date | *Tanggal*

\_\_\_\_\_  
Coach/Teacher's Signature & Full Name + Stamp (if any)  
*Tanda Tangan & Nama Lengkap Pelatih/Guru + Cap (jika ada)*



# Admission Statement

**READ CAREFULLY BEFORE YOU SIGN!** Bacalah dengan seksama sebelum Anda menandatangani!

## PART A - ADMISSION REGULATIONS

Hereby affirm that,

*dengan ini menegaskan bahwa,*

- I understand that the education program of UPH/STPPH is characterized by the Christian Faith and based on the Pancasila and The Constitution of Republic of Indonesia of 1945.  
*Saya mengetahui penyelenggaraan pendidikan di UPH/STPPH bercirikan iman Kristiani dan berdasarkan Pancasila dan Undang-undang Dasar 1945*
- I understand that Re-registration document submission will be submitted to the Registrar Office, according to the specified timeline. And I am willing to accept all consequences if I do not do the Re-registration or I do not submit Re-registration document completion.  
*Saya mengerti bahwa penyerahan dokumen pendaftaran ulang diserahkan kepada Registrar Office, sesuai batas waktu yang telah ditentukan. Dan saya bersedia menanggung segala konsekuensi jika saya tidak melakukan/melengkapi dokumen pendaftaran ulang.*
- All documents that I submit are legal and binding. I am fully responsible for any consequences of and willing to accept all sanctions for any INCORRECT information.  
*Semua dokumen yang dikumpulkan ke UPH adalah sah. Saya bersedia menanggung segala sanksi apabila informasi yang saya berikan TIDAK BENAR.*
- I understand that the name, place of birth, and date of birth writing must be in accordance with those stated on the birth certificate.  
*Saya mengerti bahwa penulisan nama, tempat, dan tanggal lahir harus sesuai dengan yang tercantum pada akta kelahiran.*
- I am willing to accept sanctions (dismissal) from UPH/STPPH if I cannot submit a copy of a High School Certificate or Letter of Equivalency or PAKET C certificate during re-registration or in special circumstances by the latest 1 (one) year after effective class begin, even though the tuition fee has been paid.  
*Saya bersedia menanggung sanksi (dikeluarkan) dari UPH/STPPH jika saya tidak dapat menyerahkan fotokopi ijazah SMA Nasional atau Surat Penyetaraan Ijazah atau ijazah PAKET C selama pendaftaran ulang berlangsung atau dalam keadaan tertentu paling lambat 1 tahun setelah perkuliahan dimulai walaupun sudah diterima dan membayar uang kuliah.*
- I truthfully declare that I have never been given any academic sanction or dismissal from any other university.  
*Saya menyatakan dengan sebenar-benarnya bahwa saya tidak pernah menerima sanksi akademik atau dikeluarkan dari universitas manapun.*
- As foreign student, I am obliged to submit foreign study permit issued by Ministry of Research, Technology, and Higher Education RI and the Indonesian Limited Stay Permit Card sponsored by UPH.  
*Sebagai warga negara asing, saya berkewajiban untuk menyerahkan surat ijin belajar warga negara asing yang dikeluarkan oleh Kementerian Riset, Teknologi, dan Pendidikan Tinggi Republik Indonesia dan kartu ijin tinggal terbatas di Indonesia yang disponsori oleh UPH.*
- As foreign student, I must paid the admission fee before May 8th, 2019. I am willing to accept all consequences if I make admission payment after the deadline set by UPH.  
*Sebagai warga negara asing, saya harus melakukan pembayaran biaya kuliah sebelum tanggal 8 Mei 2019. Saya bersedia menanggung segala konsekuensi jika saya melakukan pembayaran setelah tanggal yang telah ditentukan oleh UPH.*
- I understand that if I miss the first ten days of class without any notification, I will be considered to have withdrawn from UPH.  
*Saya mengerti jika saya tidak menghadiri 10 hari pertama perkuliahan tanpa keterangan apapun, maka saya dianggap mengundurkan diri dari UPH.*
- I understand that Dual Degree program will start after the first year of class. These programmes are subject to change according to the applied rules and regulations.  
*Saya mengerti bahwa program Dual Degree akan dilaksanakan setelah tahun pertama perkuliahan, sehingga akan ada kemungkinan terjadi perubahan.*
- I understand that if the quota of a specific program is full, UPH has the right not to accept any additional students in the class even though it is before the payment deadline.  
*Saya mengerti bahwa jika batas maksimum kapasitas jumlah mahasiswa yang dapat diterima di jurusan tertentu sudah tercapai, maka UPH berhak menolak menambah jumlah mahasiswa dikelas tersebut meskipun belum mencapai batas akhir pembayaran.*
- UPH is unable to return any documents that have been submitted as part of the application process.  
*UPH tidak dapat mengembalikan semua dokumen persyaratan pendaftaran yang telah dikumpulkan.*
- All payments transferred to Pelita Harapan Foundation cannot be refunded or transferred to another person for any reason and my parents and I hereby confirmed our acceptance of the consequences of provision and will not file any law suit in connection.  
*Seluruh pembayaran yang telah ditransfer ke Yayasan Universitas Pelita Harapan tidak dapat ditarik kembali atau ditransfer ke orang lain dengan alasan apapun dan saya bersama dengan orang tua saya dengan ini menegaskan bahwa kami sudah mengerti dan menerima konsekuensi ini dan tidak akan mengajukan gugatan hukum apapun di kemudian hari.*
- UPH is non smoking university. Therefore, smoking is strictly prohibited in UPH area.  
*UPH adalah kampus bebas rokok. Oleh karena itu, merokok sangat dilarang di area kampus UPH.*
- I agree to abide by the Regulations stated by the University, both now and in the future.  
*Saya bersedia mentaati Statuta, Peraturan Tata Tertib Kampus, dan peraturan lain yang telah dan akan diberlakukan.*
- I have read and fully understand the regulations and registration requirements stated in this Application Form.  
*Saya telah membaca dan mengerti ketentuan serta persyaratan pendaftaran dalam Formulir Aplikasi ini.*

Place | Tempat

Date | Tanggal



## Drug Free Statement

**READ CAREFULLY BEFORE YOU SIGN!***Bacalah dengan seksama sebelum Anda menandatangani!***PART B - DRUG FREE STATEMENT**

*I hereby declare truthfully that I: (Mark the corresponding statement)*

*Dengan ini saya menyatakan dengan sesungguhnya bahwa saya: (tanda pernyataan yang sesuai)*

- Never take drugs nor i involve with drugs in any forms.  
*Tidak pernah mengonsumsi narkoba dan terlibat narkoba dalam bentuk apapun.*
- Took drugs in the past but have been declared free and clean from drugs, as proven by the official Drugs Exemption Certificate from Siloam Hospital attached.  
*Pernah mengonsumsi narkoba namun sudah dinyatakan bebas dan bersih dari narkoba, dibuktikan dengan Surat Keterangan Bebas Narkoba resmi dari Rumah Sakit Siloam terlampir.*

Furthermore, I am willing to follow UPH's inspection procedures, including taking random urine and blood tests during my study at UPH.

*Selanjutnya, saya bersedia mengikuti prosedur pemeriksaan yang dilakukan secara acak oleh pihak Universitas Pelita Harapan (UPH) termasuk tes urin dan atau darah selama mengikuti proses belajar mengajar di UPH.*

I, the undersigned:

*Saya yang bertanda tangan di bawah ini:*

Citizenship ID/NIK <i>Nomor Induk Kependudukan</i>	:	<input type="text"/>
Passport Number <i>(For Foreigner)</i>	:	<input type="text"/>
Full Name <i>Nama Lengkap</i>	:	<input type="text"/>

**I have read and fully understood the regulations and registration requirements stated in the Admission Statement (Page 17-18).**

*Saya telah membaca dan mengerti ketentuan serta persyaratan pendaftaran dalam Pernyataan Admisi (Halaman 17-18).*

*I hereby write this statement letter truthfully. I am willing to be processed under the rules in force at UPH, and willing to accept the Dismissal Consequences should my statement prove to be untruthfully.*

*Demikian surat pernyataan ini saya buat dengan sesungguhnya. Saya bersedia diproses berdasarkan peraturan yang berlaku di UPH, serta bersedia menerima segala konsekuensi termasuk dikeluarkan apabila di kemudian hari pernyataan saya terbukti tidak benar.*

Place   Tempat	Date   Tanggal	<div style="border: 1px dashed black; padding: 5px; text-align: center;">Stamp Duty/Materai Rp. 6000</div>	
<small>Please sign on the stamp duty/ Harap tanda tangan mengenai materai</small>			<small>Please sign on the stamp duty/ Harap tanda tangan mengenai materai</small>
PARENT/GUARDIAN'S SIGNATURE & FULL NAME <i>Tanda Tangan &amp; Nama Lengkap Orang Tua/Wali</i>		PROSPECTIVE STUDENT'S SIGNATURE & FULL NAME <i>Tanda Tangan &amp; Nama Lengkap Calon Mahasiswa</i>	



# Full English Class Application Form

Prospective Student Who Apply To Full English Class Is Required To Fill This Form

Form Number :

Full Name :

Major :


Phone Number :

E-mail Address :  Mobile Number :

I will submit TOEFL/IELTS score by :

- Take TOEFL Test at UPH Language Center. Please check the update schedule at [www.international.uph.edu](http://www.international.uph.edu) (Services) or e-mail to [international@uph.edu](mailto:international@uph.edu)
- Submit a copy of TOEFL/IELTS Certificate (Submission deadline: June 28, 2019)  
 \* we accept only TOEFL/IELTS results from LIA, AMINEF, TOEFL/IELTS International

## REQUIREMENTS / PERSYARATAN

- This form is required ONLY for Prospective Student who apply to Full English Class as listed below:
    - Communication
    - International Relation
    - Food Technology
    - Hospitality Management
  - Prospective Students must submit **a copy of valid certificate of TOEFL/IELTS or TOEFL certificate from UPH Language Center.**  
 The minimum score to apply Full English Class:  
 TOEFL Paper Based Test : 500  
 TOEFL Internet Based Test : 59 – 60  
 IELTS : 5.0  
 If the requirement above can not be fulfilled, the Prospective Students could not apply Full English Class.
  - Full English Class has limited seats. All applications will be processed according to top highest score based on quota. Final decision by UPH is an absolute decision.
  - Full English Class is distributed on **first day class in first term.**
- Notes:**
- **UPH Business School and UPH School of Law** also offer International Class. (Please refer to page 2). 
  - Upon registration, student who applied to Business School International Class and Foreign Student (Non Indonesian Citizen) required to submit TOEFL IBT or IELTS Certificate with minimum score 71 for TOEFL IBT or 5.5 for IELTS or 530 for EAT.
- \*EAT (English Assesment Test)

\_\_\_\_\_, \_\_\_\_\_  
 Place Date

Received by,

Verified by,

( \_\_\_\_\_ )  
 Prospective Student's Signature & Full Name

( \_\_\_\_\_ )  
 Admission Staff's Signature & Full Name

( \_\_\_\_\_ )  
 UPH Language Center's Signature & Full Name





# Admission Statement

**READ CAREFULLY BEFORE YOU SIGN!** Bacalah dengan seksama sebelum Anda menandatangani!

## PART A - ADMISSION REGULATIONS

Hereby affirm that,

*dengan ini menegaskan bahwa,*

- I understand that the education program of UPH/STPPH is characterized by the Christian Faith and based on the Pancasila and The Constitution of Republic of Indonesia of 1945.  
*Saya mengetahui penyelenggaraan pendidikan di UPH/STPPH bercirikan iman Kristiani dan berdasarkan Pancasila dan Undang-undang Dasar 1945*
- I understand that Re-registration document submission will be submitted to the Registrar Office, according to the specified timeline. And I am willing to accept all consequences if I do not do the Re-registration or I do not submit Re-registration document completion.  
*Saya mengerti bahwa penyerahan dokumen pendaftaran ulang diserahkan kepada Registrar Office, sesuai batas waktu yang telah ditentukan. Dan saya bersedia menanggung segala konsekuensi jika saya tidak melakukan/melengkapi dokumen pendaftaran ulang.*
- All documents that I submit are legal and binding. I am fully responsible for any consequences of and willing to accept all sanctions for any INCORRECT information.  
*Semua dokumen yang dikumpulkan ke UPH adalah sah. Saya bersedia menanggung segala sanksi apabila informasi yang saya berikan TIDAK BENAR.*
- I understand that the name, place of birth, and date of birth writing must be in accordance with those stated on the birth certificate.  
*Saya mengerti bahwa penulisan nama, tempat, dan tanggal lahir harus sesuai dengan yang tercantum pada akta kelahiran.*
- I am willing to accept sanctions (dismissal) from UPH/STPPH if I cannot submit a copy of a High School Certificate or Letter of Equivalency or PAKET C certificate during re-registration or in special circumstances by the latest 1 (one) year after effective class begin, even though the tuition fee has been paid.  
*Saya bersedia menanggung sanksi (dikeluarkan) dari UPH/STPPH jika saya tidak dapat menyerahkan fotokopi ijazah SMA Nasional atau Surat Penyetaraan Ijazah atau ijazah PAKET C selama pendaftaran ulang berlangsung atau dalam keadaan tertentu paling lambat 1 tahun setelah perkuliahan dimulai walaupun sudah diterima dan membayar uang kuliah.*
- I truthfully declare that I have never been given any academic sanction or dismissal from any other university.  
*Saya menyatakan dengan sebenar-benarnya bahwa saya tidak pernah menerima sanksi akademik atau dikeluarkan dari universitas manapun.*
- As foreign student, I am obliged to submit foreign study permit issued by Ministry of Research, Technology, and Higher Education RI and the Indonesian Limited Stay Permit Card sponsored by UPH.  
*Sebagai warga negara asing, saya berkewajiban untuk menyerahkan surat ijin belajar warga negara asing yang dikeluarkan oleh Kementerian Riset, Teknologi, dan Pendidikan Tinggi Republik Indonesia dan kartu ijin tinggal terbatas di Indonesia yang disponsori oleh UPH.*
- As foreign student, I must paid the admission fee before May 8th, 2019. I am willing to accept all consequences if I make admission payment after the deadline set by UPH.  
*Sebagai warga negara asing, saya harus melakukan pembayaran biaya kuliah sebelum tanggal 8 Mei 2019. Saya bersedia menanggung segala konsekuensi jika saya melakukan pembayaran setelah tanggal yang telah ditentukan oleh UPH.*
- I understand that if I miss the first ten days of class without any notification, I will be considered to have withdrawn from UPH.  
*Saya mengerti jika saya tidak menghadiri 10 hari pertama perkuliahan tanpa keterangan apapun, maka saya dianggap mengundurkan diri dari UPH.*
- I understand that Dual Degree program will start after the first year of class. These programmes are subject to change according to the applied rules and regulations.  
*Saya mengerti bahwa program Dual Degree akan dilaksanakan setelah tahun pertama perkuliahan, sehingga akan ada kemungkinan terjadi perubahan.*
- I understand that if the quota of a specific program is full, UPH has the right not to accept any additional students in the class even though it is before the payment deadline.  
*Saya mengerti bahwa jika batas maksimum kapasitas jumlah mahasiswa yang dapat diterima di jurusan tertentu sudah tercapai, maka UPH berhak menolak menambah jumlah mahasiswa dikelas tersebut meskipun belum mencapai batas akhir pembayaran.*
- UPH is unable to return any documents that have been submitted as part of the application process.  
*UPH tidak dapat mengembalikan semua dokumen persyaratan pendaftaran yang telah dikumpulkan.*
- All payments transferred to Pelita Harapan Foundation cannot be refunded or transferred to another person for any reason and my parents and I hereby confirmed our acceptance of the consequences of provision and will not file any law suit in connection.  
*Seluruh pembayaran yang telah ditransfer ke Yayasan Universitas Pelita Harapan tidak dapat ditarik kembali atau ditransfer ke orang lain dengan alasan apapun dan saya bersama dengan orang tua saya dengan ini menegaskan bahwa kami sudah mengerti dan menerima konsekuensi ini dan tidak akan mengajukan gugatan hukum apapun di kemudian hari.*
- UPH is non smoking university. Therefore, smoking is strictly prohibited in UPH area.  
*UPH adalah kampus bebas rokok. Oleh karena itu, merokok sangat dilarang di area kampus UPH.*
- I agree to abide by the Regulations stated by the University, both now and in the future.  
*Saya bersedia mentaati Statuta, Peraturan Tata Tertib Kampus, dan peraturan lain yang telah dan akan diberlakukan.*
- I have read and fully understand the regulations and registration requirements stated in this Application Form.  
*Saya telah membaca dan mengerti ketentuan serta persyaratan pendaftaran dalam Formulir Aplikasi ini.*

Place | Tempat

Date | Tanggal



