



TRAVEL SCHEDULE FORM - International Students

SECTION 1 - PERSONAL PROFILE

Full Name

Gender Male Female

Place of Birth _____ Date of Birth / /

Citizenship

Mobile

E-mail

Faculty/School of

Major

Academic Year

SECTION 2 - NATIONALITY & PASSPORT DETAIL

Passport No.

Issue Date / /

DD/MM/YY

Expired Date / /

DD/MM/YY

Country of Issue

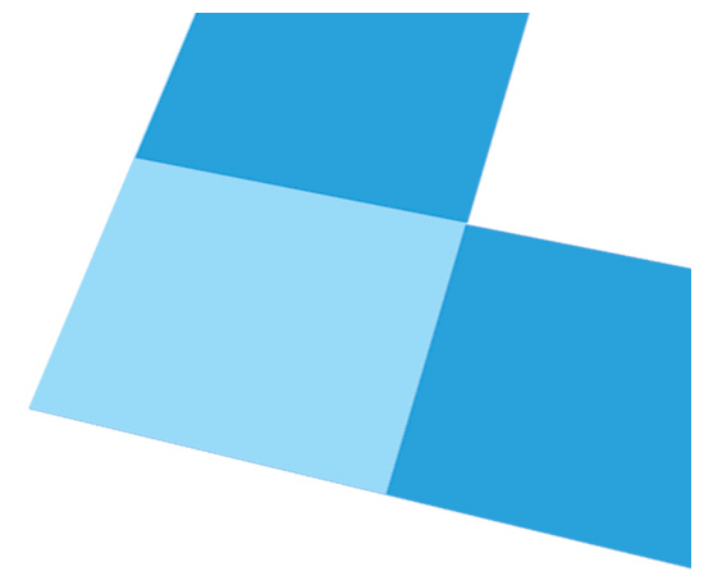
Nationality

SECTION 3 - TRAVEL INFORMATION

DEPARTURE FLIGHT

ARRIVAL

Port of Embarkation (_____)	Port of Disembarkation JAKARTA (Soekarno Hatta International Airport)
Date :	Date :
Airline Name :	Estimate Time Arrival [ETA] :
Flight Number :	Arrival Terminal/Gate :
Departure Time :	



SECTION 4 - TRAVEL INSURANCE INFORMATION

Travel/Health insurance provider

Policy #

SECTION 5 - EMERGENCY CONTACT INFORMATION

Emergency contact person

Relationship to student

Address of emergency contact person

E-mail

Tel

Mobile

Disclosure is voluntary but recommended so that the authorize person can act accordingly to mitigate risk and respond appropriately in the event of an emergency. All information will remain confidential and will be used for emergency purposes. Form will be held by the International officer, Office of Admission and disposed of in a secure manner following the trip.

Student's Signature

Date :