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Description automatically generated

**GRADUATE PROGRAMS**

**Universitas Sriwijaya**

## **REGISTRATION FORM**

**GRADUATE PROGRAMS**

# FACULTY OF TEACHER TRAINING AND EDUCATION

# UNIVERSITAS SRIWIJAYA

# PALEMBANG SOUTH SUMATERA

# INDONESIA

Phone: 0711-580058

E-mail : support@fkip.ac.id

Home page: www.fkip.unsri.ac.id

# A yellow flower with a white star and blue and black text Description automatically generated**GRADUATE PROGRAMS**

## Universitas Sriwijaya

### **REGISTRATION FORM**

1. Full Name

2. Place & Date of Birth dd. mm. yy.

3. Sex Male Female

4. Blood Types A B O AB

5. Mailing Address

E-mail. Phone Number

6. Institution

7. Employee ID

8. Position

9. Institution Address

Phone Numbe

10. Educational Background

University Faculty Department Date of Graduation GPA

11. Publication Yes (attached) titles (how many) No

12. Proposed Programs Doctoral Program in Mathematics Education

Master’s Program in Language Education

Master’s Program in Mathematics Education

Master’s Program in Educational Technology

Master’s Program in Sports Education

Master’s Program in Physics Education

13. Have you applied for graduate program at Universitas Sriwijaya before?

Never Yes, at (what year)

14. Academic Referees

Name Position Phone Number E-mail Address

a.

b.

15. Funding Self-funded Funded by Institution

Scholarships (mention the scholarships)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

- -2023

Signature and Full Name

Notes : - Put a cross (X) on the appropriate choice

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## Universitas Sriwijaya

### **LETTER OF REFERENCE**

1. Applicant’s Name

2. Proposed Program Level

3. Proposed Field of Study

4. How long have you known the applicant?

- as former students years

- as subordinate years

- as colleague years

5. Please describe the applicant's qualifications and potential to successfully completing further academic study.

(not more than 350 words for each point)

Applicant’s outstanding talents

How he or she compares with peers, both academically and in leadership roles.

Observation on the applicant’s characters

Other comments or relevant insight that you can offer that are not likely available from other sources.

6. If there are problems related to the applicant's educational progress,

I am willing to be contacted for giving consideration

I am not willing to be contacted for giving consideration

7. Referee’s Personal Information

Full Name

Position

Mailing Address

Phone Number E-Mail

- - 2019

Referee’s signature

Notes : - Put a cross (X) on the appropriate choice

- Please type and put in a sealed envelope