



**U.S. EMBASSY JAKARTA**  
**APPLICATION FOR FOREIGN NATIONAL STUDENT INTERNSHIP PROGRAM**

POSITION		
1. Position Title	2. Agency/Section	
PERSONAL INFORMATION		
3. Last Name (s) / Surnames	First Name	Middle Name
4. Other Names Used		
5. Date of Birth (mm-dd-yyyy)	6. Place of Birth	
7. Current address	8. Phone Numbers Day Evening Cell	
9. E-mail Address		
10. How did you learn about this program? <input type="checkbox"/> A <input type="checkbox"/> Relative <input type="checkbox"/> Employee <input type="checkbox"/> University Other (Please specify) _____		
11. Do you have any relatives that work for the U.S. Mission to Indonesia? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list the following (If you need more space, use an additional sheet of paper):		
Relative's Name	Department where relative works	Relative's length of employment
_____	_____	_____
_____	_____	_____
_____	_____	_____
12. Current Citizenship		
13. Do you have U.S. Citizenship	<input type="checkbox"/> Yes <input type="checkbox"/> No	
EDUCATION (UNIVERSITY/SCHOOL/EDUCATIONAL INSTITUTION)		
14. For each institution you have attended, provide the following information in the space below. Begin with your present school and work backwards. Use continuation sheets as necessary.		
14a. Name and full address of current institution		
Name, title, and telephone number of primary instructor		
Dates attended (MM/YY)		

Diploma/Degree/Certificate	
Major field(s) of study	
14b. Name and full address of institution	
Name, title, and telephone number of primary instructor	
Dates attended (MM/YY)	
Diploma/Degree/Certificate	
Major field(s) of study	
14c. Name and full address of institution	
Name, title, and telephone number of primary instructor	
Dates attended (MM/YY)	
Diploma/Degree/Certificate	
Major field(s) of study	

**LICENSE, SKILLS, TRAINING, MEMBERSHIP, AND RECOGNITION**

15. List professional licenses, certifications, formal and on-line training, equipment you can use, and other special skills and abilities you consider relevant to the position. (Use additional pages, as required).

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

16. List professional organizations, associations, awards, honors, fellowships, and publications you consider significant.

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

**LANGUAGES**

15. Identify the language and indicate extent of your competence for each: 4 = Fluent; 3 = Good; 2 = Limited; 1 = Rudimentary; 0 = Not at all

Language	Speak	Read	Write	Understand
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\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**WORK EXPERIENCE (if applicable)**

16. Start with your most recent position and work backwards. Include all work experience, paid and voluntary. Use continuation sheets as necessary.

16a. Exact title of position

Dates worked	From _____ (MM/YYYY)	To _____ (MM/YYYY)	Salary per month in U.S. Dollars or Local Currency	Numbers of hours worked per week
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Name and full address of employer	Immediate supervisor's name and contact information
	Name _____
	Phone Number _____
	E- mail Address _____

Description of work (Describe specific duties, responsibilities, and accomplishments)

Reason(s) for leaving. (Do not write "N/A" or Not applicable)

16b. Exact title of position

Dates worked	Dates worked	Dates worked	Dates worked	Dates worked	Dates worked
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Name and full address of employer	Name and full address of employer
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Description of work (Describe specific duties, responsibilities, and accomplishments)

Reason(s) for leaving. (Do not write "N/A" or Not applicable)

16c. Exact title of position

Dates worked

Dates worked

Dates worked

Dates worked

Dates worked

Dates worked

Name and full address of employer

Name and full address of employer

Description of work (Describe specific duties, responsibilities, and accomplishments)

Reason(s) for leaving. (Do not write "N/A" or Not applicable)

17. Have you ever worked for the U.S. government?

Yes

No

18. Have you ever been dismissed or forced to resign from a position?

Yes

No

If yes, please explain:

19. Computer Skills (How do you rate your computer skills – please circle: 5 = excellent; 3 = good; 1 = fair; 0 = none  
List computer programs in which you have experience

**REFERENCES**

20. List three personal references who are not relatives or former supervisors who have knowledge of your work performance. Mission HR will obtain your permission before contacting any references.

Name	Address or E-mail	Telephone	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**SIGNATURE AND CERTIFICATION**

21. You must sign this application. Read the following carefully before you sign.

- I understand that any information I give may be investigated and that a false statement may be grounds for non-consideration or dismissal of my participation in the intern program, if I am selected.
- I understand that, if I am provisionally selected, a U.S. Mission to Indonesia/U.S. ASEAN Indonesia-required security certification is a prerequisite.
- I understand that, if I am provisionally selected, a U.S. Mission to Indonesia/U.S. ASEAN Indonesia- required medical certification is a prerequisite.
- I certify that, to the best of my knowledge, all of my statements are true, complete, and made in good faith.

Signature \_\_\_\_\_ Date (mm-dd-yyyy) \_\_\_\_\_

**CONTINUATION SHEET – ADDITIONAL INFORMATION (if applicable)**  
 Duplicate continuation sheets as needed.

**EDUCATION (UNIVERSITY/SCHOOL/EDUCATIONAL INSTITUTION)**

For each institution you have attended, provide the following information in the space below. Begin with your present school and work backwards. Use continuation sheets as necessary.

Name and full address of current institution	
Name, title, and telephone number of primary instructor	
Dates attended (MM/YY)	
Diploma/Degree/Certificate	
Major field(s) of study	

**CONTINUATION SHEET – ADDITIONAL INFORMATION (if applicable)**  
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**WORK EXPERIENCE (if applicable)**

Start with your most recent position and work backwards. Include all work experience, paid and voluntary. Use continuation sheets as necessary.

Exact title of position

Dates worked	From _____ To _____ (MM/YYYY) (MM/YYYY)	Salary per month in U.S. Dollars or Local Currency	Numbers of hours worked per week
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Name and full address of employer

Immediate supervisor's name and contact information

Name \_\_\_\_\_  
 Phone Number \_\_\_\_\_  
 E- mail Address \_\_\_\_\_

Description of work (Describe specific duties, responsibilities, and accomplishments)

Reason(s) for leaving. (Do not write "N/A" or Not applicable)