ACICIS SCHOOL TOURS Application Package

www.acicis.edu.au

Welcome to the ACICIS school tour!

All program activities are designed to provide experiences and skills that will bring Indonesia out of the textbook and into participant's lived experience.

This package includes the essential information you need to apply to participate in the ACICIS school tour.

Applicants are required to have a passport valid for at least 6 months beyond their projected return date.

Visa and Travel Requirements

Participants are required to have a passport valid for more than six months beyond the intended length of stay. You must meet this requirement in order to be eligible for a visa.

Participants must enter Indonesia on a prepurchased 60 day Social-Cultural Visa. This is a single entry sponsored visa that is valid if presented within three months from the date of issue. The current fee for a Social-Cultural Visit visa is \$AUD70, which is included in the cost of your tour. Students must obtain this in Perth with the assistance of the ACICIS Secretariat. The Secretariat will provide all necessary documentation and will require your passport along with the completed documentation to be couriered the Secretariat no later than 6 weeks prior to the commencement of your tour in order to obtain this visa for you.

Accompanying Teachers/Adults

Any teachers, parents or other adults participating in the school tour must fill out this application form and must obtain the same social-cultural visa as the school students.

Withdrawal

The \$800 deposit that is required to lock-in dates for tours is non-refundable. The balance is due one month prior to tour start dates. You must notify ACICIS of finalised student numbers before the balance is due, as we will be confirming places at Sanata Dharma University for the language classes. The balance of fees is also non-refundable.

Proof of Health and Insurance Cover

Health and Travel Insurance cover including provision for emergency evacuation is obligatory for the school tour. Prior to departure for Indonesia, ACICIS will require proof of adequate cover, including a copy of the Policy type, the Policy number, and the emergency contact number, to be submitted to the Secretariat at least one month before departure to Indonesia.

Routine medical care is available in Indonesia. However, medical insurance with coverage for medical evacuation and repatriation is compulsory. ACICIS is not liable for personal loss, injury, theft, damage, travel cancellations, etc. These are all the responsibility of each individual applicant. It is the applicant's responsibility to obtain and take with them a copy of their Insurance Policy and any documentation, (for example, insurance card) that is required for utilisation of the cover.

When applying for the ACICIS school tour applicants will be required to supply a doctor's certificate of good health and are strongly advised to use this opportunity to consult their doctor

for information about recommended medication and vaccinations. ACICIS is not able to advise applicants in this area. Applicants should note that specialist pharmaceutical medication is sometimes difficult to obtain from local pharmacies in Indonesia, and as such it is wise to take adequate supplies of any required medication. For more information on health matters please visit the ACICIS website.

Legal Requirements

Participants on all ACICIS programs must maintain minimum standards of conduct while in Indonesia.

These include:

- not working in Indonesia;
- abiding by all Indonesian laws;
- abiding by security regulations for foreigners concerning protests, public demonstrations, and political activities (i.e. noninvolvement).

The consequences of breaching these standards are very serious. For instance, penalties for possession, use, or trafficking in illegal drugs are strict and convicted offenders can expect lengthy prison sentences.

ACICIS has a policy that any applicants found to have breached the above restrictions on attending demonstrations or taking drugs, can be expelled from the program.

Disclaimer

Indonesian government and university regulations and fees may change at any time without notice, and are beyond the control of ACICIS. ACICIS reserves the right to pass on to participants any Indonesian government or university price increase up to the commencement of the orientation period. Participants will be expected to cooperate with the Secretariat when advised that such changes have occurred.

Applications

All students and accompanying teachers/parents/adults must complete this form. Please send completed forms to our ACI-CIS Secretariat Staff via email (preferable) or post. Here are the email and postal address details:

e enquiries@acicis.edu.au

ACICIS Secretariat The University of Western Australia (M363) 35 Stirling Highway Perth WA 6009 **Australia**

p +61 8 6488 6675

Application Package Checklist	
Applicant's name	School
Submitted DD/MM/YYYY	
Completing the Application Pack	
Please ensure that all items on the checklist are include must be completed, signed and dated as required to a applications may hinder acceptance into the ACICIS so	void delays in administrative processing. Incomplete
ACICIS FORMS	
Personal Details	
Health and Travel Insurance Policy details	
Personal Medical Statement	
Statement of Good Health from Applicant's Doctor	
Statement by Applicant	
Applicant Acknowledgement and Waiver	
Audio/Video/Photograph Consent Form	
ADDITIONAL:	
Photocopy of first page of passport	
Student photo (preferrably latest school d\c\takete	
To help efficient processing of applications, please ensu	re the following before submission:
All forms have been completed, signed and dated	
Forms are in order as shown on the checklist	
 All staples, paperclips and fastening devices have be Passport expiry date is valid for 6 months after intended 	



Date DD/MM/YYYY

Indonesia

Signature

PERSONAL DETA	AILS	Current School Year (N/A for Teachers):		
Please fill in deta	rils as it appears in your passport:	☐ Year 7 ☐ Year 10		
Title Surne	ame	□ Year	8	☐ Year 11
Given Names		□ Vegr 9 □ Vegr 12		
Gender (M or F)	Date of Birth DD/MM/YYYY	□ Other	:	
Place of Birth				
Nationality		Languaç	ge Level (N/	/A for Teachers):
Passport Numbe	1	□ Begg	iner	
Place of Issue/Au	uthority	□ Intern	nediate	
Date of Issue	DD/MM/YYYY	□ Adva	nced	
Expiry Date	DD/MM/YYYY			
	re your passport is valid for more than 6	Shirt Size	(Australian	n Standard):
monins beyond	the intended length of stay in Indonesia.	\square S	□М	□ L □ XL
Contact Details		□ XXL	□ XXXL	□ XXXXL
(please include interr	national/state extensions)			
Mobile			nt Travel Exp	-
Home phone		If you have any had any previous travel experience to Indonesia, please outline when, how long, where to (city)		
Email		and who	at reason (e	eg holiday):
Permanent Hom	e Address	***************************************	•••••	
Same as Next of	Kin 🗆	***************************************		
		Do you l	nave any sp	pecial dietary requirements?
		☐ Yes		□ No
		Please c	letail (ie veç	getarian):
Next of Kin / Eme	ergency Contact	***************************************		
Name		***************************************		
Relationship		*************	•••••	
Address				
		Where c	lid you first h	hear about the ACICIS?
Home phone		***************************************		
Mobile		******	***************************************	
Email				

HEALTH AND TRAVEL INSURANCE POLICY DETAILS

Health and travel insurance coverage including provision for emergency evacuation is compulsory for applicants in the ACICIS study tour. ACICIS requires proof of adequate cover, including a copy of the policy and policy number, policy type, and emergency contact number, be submitted to the secretariat before departure.

ACICIS is not liable for personal loss, injury, theft, damage, travel cancellations, etc. These are the responsibility of individual applicants, who are advised to obtain and take with them a copy of their insurance policy and any other relevant documentation that is required.

Proof of insurance does not need to be with ACICIS until approximately one month before departure.

Name of applicant Please indicate below which is relevant to your circumstances:		
I have checked with the Officer responsible for insurance matters at my school and I can confirm that the school's insurance policy covers me. The health and travel insurance policy details are as follows (please note that a capy of the policy must also be sent to the ACICIS secretarial prior to departure): Company	Name of a	pplicant
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Policy Type Emergency Contact Phone		school's insurance policy covers me. The health and travel insurance policy details are as follows (please
Policy Type Emergency Contact Phone or I have not attached a photocopy of this policy but will provide one to the ACICIS secretariat well before I depart for Indonesia. or My school's insurance policy will not cover me whilst undertaking the study tour/I am a private applicant and not covered by a school policy. Therefore, if accepted into the study tour, I undertake to arrange my own travel and health insurance, and will provide the ACICIS Secretariat with a photocopy of this policy one month before departure. *Please note, some insurance policies do not allow you to extend from overseas. If there is a chance you may stay longer than initially intended, it is a good idea to take out insurance which allows you to extend from overseas.		Company
erregency Contact Phone		Policy Number
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Signed Date DD/MM/YYYY		
Signed Date DD/MM/YYYY		
	Sianed	Date DD/MM/YYYY

PERSONAL MEDICAL STATEMENT

ACICIS and its staff will not be responsible for any adverse health condition or any matters concerning your personal security or safety that may occur during the study tour. It is worth noting that most travel insurance policies do not cover medical and additional expenses which arise out of pre-existing medical conditions, the use of non-prescribed drugs, sexually transmitted diseases, AIDS and HIV, neurotic disorders or suicide attempts. It is your responsibility to determine that your insurance cover is adequate for your requirements and to take out additional cover if required.

ACICIS reserves the right to reconsider the application of any participants who fail to fully disclose medical conditions that may impact upon their ability to effectively participate in the program.

In the event of a medical emergency arising while you are in Indonesia, it is imperative that the ACICIS staff can quickly provide accurate information to local medical authorities on medications currently prescribed or previous medical his-

tories involving serious illness. For this reason we require all applicants to provide complete and accurate details c following:	
* All information is treated with the strictest confidentiality.	
 Please list any past medical or psychological conditions for which you required hospitalisation, long-term treatme prescribed medication: 	ent or
2. Please detail any current medical or psychological conditions for which you are taking prescribed medication:	
3. Please list any prescribed medications that you envisage using during the study tour:	
4. Please list any known allergies (including allergies to prescribed medications):	
5. Please provide details of any other medical or psychological conditions that you consider may affect your partition in the ACICIS study tour in any way (please explain your medical or emotional circumstances on a separate sif necessary).	
I declare that the above information is accurate and complete at the time of my application and I will inform an Al officer if my circumstances change during my time on the study tour. I acknowledge that ACICIS will not take ar sponsibility for my personal health, safety or security during the study tour. I agree that the release of all or any part of information to Indonesian medical authorities will be at the discretion of ACICIS but that otherwise all information proving it remain confidential.	ny re- of this
Signature of Applicant Date DD/MM/YYYY	

STATEMENT OF GOOD HEALTH FROM APPLICANT'S DOCTOR

Date	
	STATEMENT OF GOOD HEALTH on behalf of:
	Full name
On examining the patient	whose name appears above, I find them to be:
□ in good hea	Ith and capable of undertaking a two-week study tour in Indonesia
□ NOT in good	health and therefore NOT capable of undertaking a two-week study tour in Indonesia
	good health, and capable of undertaking a two weeks study tour in Indonesia, but sufne following minor health conditions which may need the treatment specified: (please
Doctor's signature	
Doctor's name	
Address	
Telephone	
Facsimile	

STATEMENT BY APPLICANT

- I declare that the information contained in this application is complete and accurate to the best of my knowledge.
- 2) I have read and understood the information provided concerning the ACICIS study tour and am willing for my child to participate in the Program on this basis.
- 3) I acknowledge that I have informed myself of the potential risks involved in participating in an ACICIS program in Indonesia, that I comprehend the nature and extent of the risks, and that I voluntarily accept those risks on behalf of my child.
- 4) I acknowledge that, while on an ACICIS program, my child is responsible at all times for their own safety and further acknowledge that neither ACICIS nor The University of Western Australia (as the Consortium's lead institution) will be liable for any claims whatsoever resulting from my child's participation in the ACICIS study tour in Indonesia.
- 5) I accept that ACICIS in no way can accept liability for my child's holiday travel.
- 6) I accept that academic credit, will be determined by the relevant Australian authorities as applicable.
- I give my permission for ACICIS to provide details of my participation in the study tour to my nominating organisation.
- 8) I acknowledge that if my child withdraws from the study tour after being accepted onto the tour, I may have to refund monies spent on my child's behalf.
- 9) Without affecting clauses herein, I accept that ACICIS (and the Consortium's lead institution, The University of Western Australia) is entitled to terminate the program in Indonesia early if it reasonably determines that it is dangerous for ACICIS participants to remain in Indonesia (whether owing to threat of terrorism, civil commotion, war, weather conditions, natural disasters or otherwise), or for any other reasons beyond the control of ACICIS and its constituent universities. I accept that if the ACICIS study tour is terminated no refund of money will be provided for fees and costs incurred.
- 10) I accept that The University of Western Australia (as the lead institution for ACICIS and on behalf of its employees and agents) is expressly excluded from any liability for any loss or damage suffered or sustained by ACI-CIS participants as a result of or in connection with any negligent act or omission on the part of the University

(or its employees or agents) (including without limitation, a decision on the part of the University to suspend or early terminate or not to suspend or early terminate the ACICIS program) and for any loss or damage suffered or sustained by any participant resulting from the suspension or early termination of the ACICIS program (including, without limitation, airfares, prepayments, foreign exchange losses), and I release the University from any liability for any loss or damage suffered by the participants as a result of the University (or any other consortium member) deciding not to credit the relevant ACICIS applicant with studies undertaken in Indonesia in the ACICIS program, resulting in any failure or delay in achieving a diploma, degree or other certification.

- 11) Without affecting any other provisions of this document, I accept that if an event of force majeure occurs any obligations which may be otherwise owed to me and my child by The University of Western Australia or any relevant entity in the ACICIS consortium will be suspended for the duration of the event of force majeure or, where the event of force majeure has permanent effect, permanently. For the purposes of this clause, "force majeure" means any event which is beyond the reasonable control of The University of Western Australia and which has the practical effect of preventing performance of any obligation otherwise imposed upon The University of Western Australia or any member of the ACICIS consortium with respect to the ACICIS program.
- 12) I agree that my child will abide by all university and government regulations or special conditions for the duration of my ACICIS study tour. I understand that failure to comply with the above, as determined by the ACICIS Program Officer, may result in my child's expulsion from the program.
- 13) I acknowledge my personal information is collected and retained by ACICIS and the University of Western Australia as the Consortium's lead institution in accordance with UWA's privacy policy available at http://www.governance.uwa.edu.au/procedures/policies/policies-and-procedures?method=document&id=UP14%2F10. I will advise ACICIS if I do not wish it to contact me beyond this application.

This form must be filled in by the parent/guardian of the applicant.

Signature of Parent	Signature of Witness
Name of Parent	Name of Witness
Date DD/MM/YYYY	Position / Occupation

APPLICANT ACKNOWLEDGEMENT AND WAIVER

Applicant's address	Home S	chool/Organisation:			
 I am aware that ACICIS is an unincorporated association of Australian and international universiting facilitating in-country Indonesian studies at, amongst others, the Host Universities. I he Host Universities do not have any public liability/risk insurance that will apply to me during the periof my child's visits to the Host Universities. I have been advised by ACICIS to seek independent financial/insurance advice in this regard. ACICIS has further advised me, as they do all applicants contemplating travel to Indonesia, that (i) the Australian Department of Foreign Affairs & Trade issues and periodically revises its Travel Advisory regaining Indonesia, a copy of which is accessible at the following website, or via the 'Smartraveller Pho Service' on 1300 139 281; (ii) deciding to travel to Indonesia and participate in the ACICIS program a personal decision that should be made on an informed basis; and (iii) I must ensure that I check the current status of the Travel Advisory for Indonesia at the time of applying for an ACICIS program an should check for any updated Travel Advisory issued by the Department since they may change from time to time: http://www.smarttraveller.gov.au/zw-cgi/view/Advice/Indonesia To the fullest extent permitted by law, neither ACICIS nor any current or future ACICIS member has a liability to me or to my child whether under the common law or otherwise (and I release and forever a discharge ACICIS and current and future ACICIS members from any such liability) flor death or any injury, disability, illness, and loss or damage of any kind suffered or sustained by me or my child arising out of connected with my involvement in the study four noted above and/or my child's presence at any Huniversity campus, including any death or any injury, disability, illness, and loss or damage of any kind suffered or sustained by me or my child arising out of connected with my involvement in the study four noted above and/or my	Study o	ption:	Indonesian School Tours		
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Signature of Witness			Signature of Witness		
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Date DD/MM/YYYY



Australian Consortium for 'In-Country' Indonesian Studies

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Study Indonesia

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