



UNIVERSITAS INDONESIA

FAKULTAS KEDOKTERAN

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NOTA DINAS

Nomor : ND- 5500 /UN2.F1.D1.4/PPM.00.00/2024

Yth : Para Peneliti FKUI
Dari : Manajer Riset dan Pengabdian Masyarakat
Perihal : Informasi Beasiswa Takeda Science Foundation

Berdasarkan surat dari Komite Seleksi *Takeda Science Foundation*, bersama ini kami informasikan bahwa untuk tahun 2025-2026, *Takeda Science Foundation* menyediakan beasiswa bagi 6 (enam) peserta untuk training di Jepang, masing-masing 1 (satu) orang untuk periode 1 - <2 tahun, 2 (dua) orang untuk periode 6 bulan, dan 3 (tiga) orang untuk periode 3 bulan. Peserta yang diutamakan adalah dokter dengan status staf pengajar berusia kurang dari 45 tahun dan telah mempunyai *host scientist* di Jepang yang bersedia membimbingnya. Keberangkatan ke Jepang paling cepat adalah pada bulan Juni 2024 setelah lolos penilaian oleh Komite Seleksi.

Bagi bapak/ibu peneliti yang berminat mengikuti beasiswa ini dimohon untuk memenuhi persyaratan dan mengisi form terlampir untuk kemudian diserahkan ke sekretariat *Takeda Science Foundation* paling lambat tanggal 31 Desember 2024. Diharapkan agar dilampirkan rencana studinya dengan rinci pada lembar terpisah.

Demikian informasi ini kami sampaikan, Atas perhatian dan kerjasama yang baik, kami ucapkan terima kasih.

31 JUL 2024

Manajer Riset dan Pengabdian Masyarakat,

Dr. Rahyussalim, Sp.OT(K)
NUP 0108050351

Takeda Science Foundation

Indonesian Selection Committee

Advisor : Prof. Dr. Farid Anfasa Moeloek, dr, SpOG(K)

Chairman : Prof. Dr. dr. Sarwono Waspadji, SpPD-KEMD

Secretary : Prof. Dr. Agus Sjahrurachman, Ph.D, SpMK

Members : Prof. Dr. dr. Rianto Setiabudy,SpFK; Prof. Dr. Faisal Yunus, Ph.D, SpP(K);

Prof. Dr. dr. Nila Djuwita Faried Anfasa Moeloek, Sp.M(K); Prof. dr. Wawaimuli Arozal, M.Biomed, Pharm.D

Address : RDTX Place, Level 18-02, Jl. Prof. Dr. Satrio Kav 3, Jakarta 12940 – Indonesia

Email : agussjachrurachman@yahoo.co.id | Phone :+62 21 8665 9400 | Fax: + 62 21 8665 9402

Jakarta, 15 Juli 2024

Kepada Yth,
Manager Riset & Pengabdian Masyarakat FKUI
Universitas Indonesia
Jakarta
di Tempat

Bersama ini kami sampaikan bahwa untuk tahun 2025-2026, *Takeda Science Foundation* menyediakan beasiswa bagi 6 (enam) peserta untuk training di Jepang, masing-masing 1 (satu) orang untuk periode 1- <2 tahun; 2 (dua) orang untuk periode 6 bulan dan 3 (tiga) orang untuk periode 3 bulan. Peserta yang diutamakan adalah dokter dengan status staf pengajar berusia kurang dari 45 tahun dan telah mempunyai *host scientist* di Jepang yang bersedia membimbingnya. Keberangkatan ke Jepang paling cepat pada bulan Juni 2024 setelah lolos penilaian oleh Komite Seleksi.

Jika ada staf dilingkungan saudara yang berminat, dipersilahkan mengisi form terlampir dan dikembalikan kepada kami paling lambat bulan 31 Desember 2024 rangkap dua dengan dilengkapi : rekomendasi pimpinan unit dan pernyataan penerimaan *host scientist*. Diharapkan agar dilampirkan rencana studinya dengan rinci pada lembar terpisah.

Demikian agar maklum.

Komite Seleksi
Sekretaris

(Prof. Agus Sjahrurachman, dr. Ph.D, SpMK)

Tembusan : Dekan Fakultas Kedokteran Universitas Indonesia
Ketua Komite Seleksi, sebagai laporan
Arsip

Syarat - syarat pengajuan Beasiswa

Takeda Science Foundation

Durasi 3,6, dan ≤ 24 Bulan

1. Isi formulir Application Letter di URL https://schol.takeda-sci.or.jp/fmi/webd/TK_SCI dengan terlebih dahulu mengirimkan email permintaan username dan password ke Medical Affairs Department PT Takeda Indonesia (email : siti.khoerunnisa@takeda.com & mailanny.kristy@takeda.com)
2. Setiap form harus diisi dengan lengkap dari form 1-4 dan jelas, Joint sureties dan keterangan sehat harap di beri stempel.
3. Rencana study dituliskan pada kertas terpisah ukuran A4 dan dalam bahasa Inggris (hanya boleh dalam 1 lembar saja).
4. Bagi yang ragu-ragu untuk menyelesaikan training sesuai dengan periode study yang diajukan agar tidak melamar.
5. Ada Invitation / Acceptance Letter dari Institusi di Jepang yang mengundang Dokter tersebut.
6. Ada sponsorship / Recommendation Letter dari Dekan Fakultas dan Kepala Departemen yang bersangkutan dalam bahasa Inggris dan diberi stempel.
7. Untuk yang bekerja di Rumah Sakit harus ada surat persetujuan dari Direktur Utama Rumah Sakit Pendidikan terkait.
8. Photo copy passport yang masih berlaku sampai saat pembuatan Application (Jika belum memiliki / belum perpanjang, harap untuk menginformasikan, tetapi jika sudah diterima sebagai peserta harus sudah memiliki).
9. Copy Ijazah Diploma yang telah ditranslate kedalam bahasa Inggris dan dilegalisir.
10. Pasphoto terbaru ukuran 40mm x 30mm (4 lembar).
11. Setelah point diatas dilengkapi, form aplikasi (rangkap 2; asli dan copy-nya) serta berkas lainnya bisa dikirimkan ke sekretariat TSF atau langsung ke :
Medical Affairs Department
PT. Takeda Innovative Medicines
RDTX Place, Level 18-02,
Jl. Prof. Dr. Satrio Kav. 3, Jakarta, 12940, Indonesia
Phone: +62 21 8665 9400 Fax: +62 21 8665 9402
12. Setelah TSF Jepang menyetujui maka akan dikirimkan Acceptance Letter ke Dokter tersebut beserta Guidebook.
13. Certificate of Eligibility akan dikirim (\pm) 2 bulan masa proses, setelah Eligibility diterima maka dokter bisa langsung proses visa.
14. Setelah visa selesai, dokter bisa menginformasikan kepada Person Incharge Takeda untuk pemesanan tiket (Tolong jangan mendadak, 1 bulan sebelum keberangkatan sudah diberitahukan).
15. Dokter memberikan informasi berapa hari beliau dapat tinggal di Jepang sehingga memudahkan Person Incharge dalam mengurus tiket pesawat, dan dokter menginformasikan mengenai penjemputan dan akomodasi apakah sudah siap atau belum.

Website Application System for TSF Fellowship Operating Manual for Applicant



Takeda Science Foundation Fellowship Program



ID

Password

 Applicant

 Mentor

 Secretary



■ Applicant

1. Operation Flow

Applicant

Ask Local Secretary to issue Account for application

Local Secretary

Issue and notice account to the applicant

Applicant

Check the input data in PDF file which is downloaded

If there are incorrect data

If there are no incorrect data

Applicant

Login the web system by using the issued account

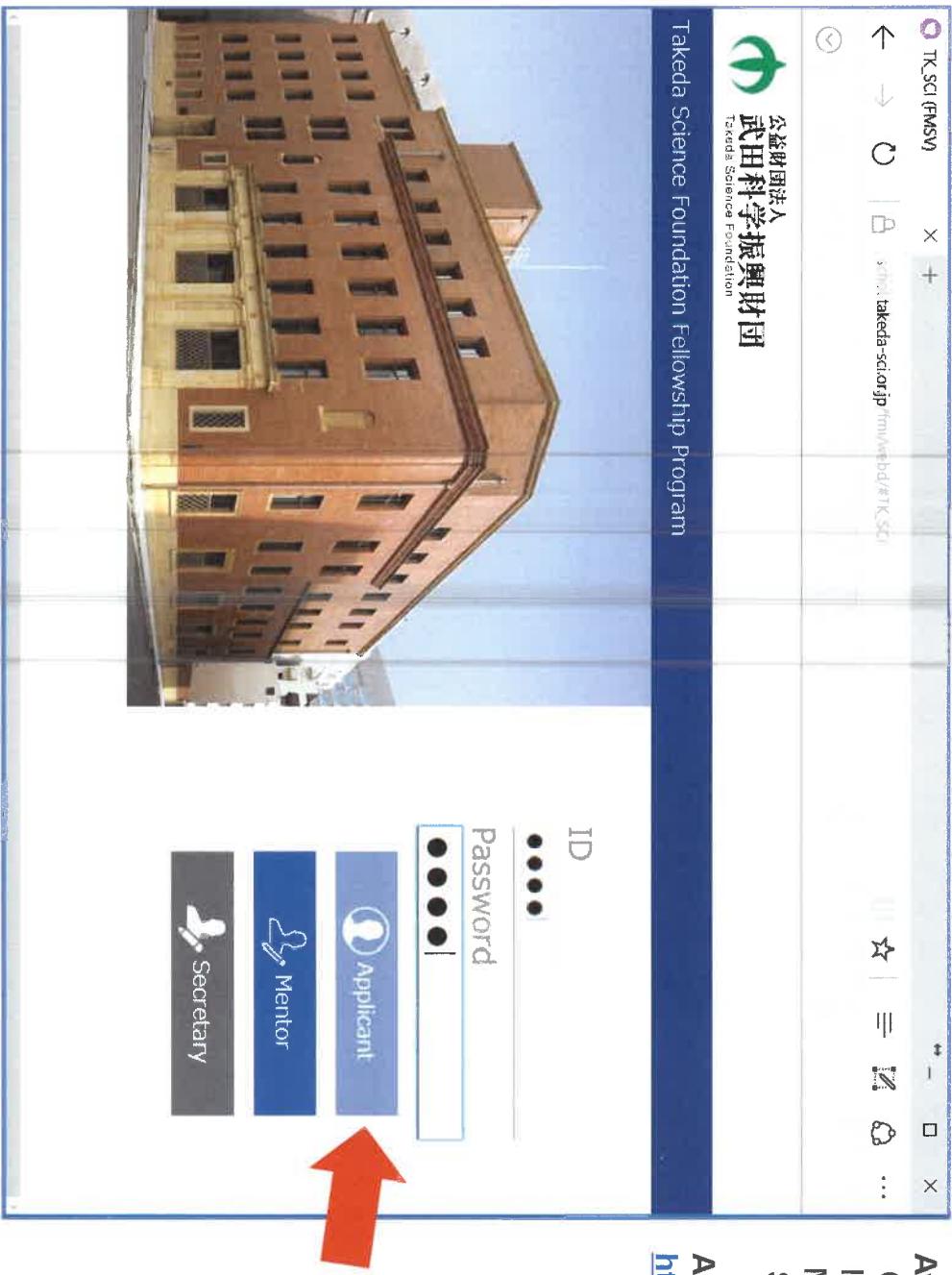
Amend the data by login web system again and confirm the amendment

Input necessary data according to Step1, 2 and 3 and click [Submit] button.

Print out the PDF, sign and send it with other necessary documents to Local Secretary.

■ Applicant

2. Log in Website Application System



Available Browser:
Chrome 48 or higher
Internet Explorer 11.x
Microsoft Edge 25 or higher
Safari 9.x



Access URL:
https://schol.takeda-sci.or.jp/fmi/webd/TK_SCI

- ① By using the available browser in PC, access to the above URL.
※Smartphone is not available.
- ② Log in by clicking [Applicant] button after input of ID and Password which are informed from Local Secretary.
- ③ If you cannot Log in, try again after a while.

■ Applicant

3. Log out from Website Application System



Welcome to the application page for Takeda Science Foundation fellowship!

- *Please enter the necessary information at Step1~3.
- *Once you submit all the information, the system will send you an email with a PDF file.
- *Please print it out and sign it, then send our office all the document required.
- *You could log in to continue this submission even if you logged out before submission.
- *You could move around between Step1~3 by clicking Tabs above.

There are 3 methods for log out:

- ① Click [log out] button, which is the most recommended way.

- ② Click [X] button on top right corner of the browser to close it.

- ③ Click [←] button on top left corner of the browser, which does not go back to previous page but log out.

Watch it if you want to continue your input.

Outline of Study in Japan	
Research Institute in Japan	
Institute name	
Faculty	
Office address	
Office Name	
Department	
Position	
Phone No.	
Fax No.	
E-mail	

Applicant

4. Input Data of Applicant



TK-SCI (POOH@aws) X + ← → ○ | ☎ www.balloon.co.jp [balloon.co.jp] ⌂

①



Application For Fellowship Step 1

Step 1

Welcome to the application page for Takeda Science Foundation fellowship!

- *Please enter the necessary information at Step1~3.
- *Once you submit all the information, the system will send you an email with a PDF file.
- *Please print it out and sign it, then send our office all the document required.
- *You could log in to continue this submission even if you logged out before submission.
- *You could move around between Step1~3 by clicking Tabs above.

First Name

Indest

Last Name

check

Middle Name

Nationality

Hometown Address

Street, Room No., etc.

Town, City, etc.

Prefecture, State, etc.

Phone No.

Fax No.

E-mail

Place of birth

Sex

Date of birth

1990/01/01

Age

20

Organization

Office

Designation

Position

User Name

AAA

User Name

BBB

E-mail

AAA@BBB.com

E-mail

CCC@DDD.com

Outline of Study in Japan

Click [OK] after input of new password.



OK

Cancel

By clicking [Change Password] button, your Password can be changed.

In the case, don't forget the new Password.

There are Step 1, 2 and 3 for input of your data for application.

To go to next Step, click [Next] after filling each column in each Step.

※ Scroll down to the bottom and be careful not to leave column open.

[日本語] (Japanese) and [English] forms are available for input of your data and English, Japanese and Chinese can be used in both forms.

Applicant

5. Note for Input of Your Data

How to input Gender:

Place of birth	*****
Sex	<input type="text"/>
Date of birth	<input type="text"/>
Age	M
Occupation	F
...	



How to input Date:

Sex	M
Date of birth	<input type="text"/>
Age	46 4 March 2017
Occupation	<input type="button"/>
Office Name	SWI MON TUE WED THU FRI SAT
Department	5 6 7 8 9 10 11
Position	12 13 14 15 16 17 18
Office address	19 20 21 22 23 24 25
	26 27 28 29 30 31 1
	2 3 4 5 6 7 8



Click the column and select "M" or "F".
Gender cannot be input directly.
Input of the other alphabetical character
would be error.

How to attach ID Photo:



*Step 3: Curriculum Vitae

<< Please drag and drop your ID photo to the left field.

Drag and drop your ID photo (PNG or JPEG file) from desktop view to square space of "Photo" by using mouse as shown in the left. If you want to change the photo, drug and drop a new photo on the first one.

■ Applicant

6. How to Upload Necessary Files



Occupational History (Including Research Activity)
From To Institution's Name

From To

Place (City)

Institution's Name

Position

日本語
English

日本語
English

Click "Upload" bottom and
click "Choose File" in the
following view.

After open a folder, select
a file to be attached and
click "Open".

Visit to Japan in the past
From To Main City Visited
Place (City)

Main Purpose

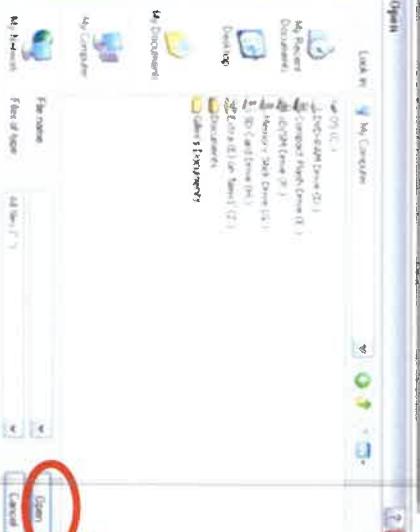
Document

Document name



After checking all the information filled
in by clicking Step 1~3 tab above,
please press "Submit".

Submit



Then, click "Upload".

If you want to upload
more, repeat the
procedure above.



A file can be deleted by clicking trash bottom and
clicking "Delete" in "Confirmation" view.

After checking all the information filled
in by clicking Step 1~3 tab above,
please press "Submit".

Submit



WORD docx



■ Applicant

7. How to Download Necessary Files



Occupational History (Including Research Activity)
From To Institution's Name

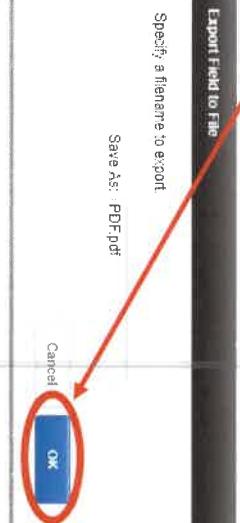
Place (City) Position

google chrome help

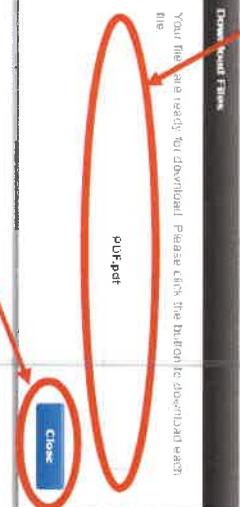
日本語 English

Click "Download" button and
click "OK" in the following view.

Visit to Japan in the past
From To Main City Visited
Main Purpose



Click the button of a file to open it.



After checking all the information filled
in by clicking Step 1~3 at above,
please press "Submit".

Submit

■ Applicant

8. Examine Input Data and Submit Application



Input data in columns in Step1, Step2 and Step3.
If you want to go back to previous Step, click the tab you want.

Document
You can upload necessary files by clicking Upload bottom.

Upload
Document name



After checking all the information filled in by clicking "Step 1~3 tab above,
please click "Submit".
After the submissions are included in the PDF

1. Application form
2. Health Report
3. Written Pledge

please make sure all the information is correct
and sign the documents.



If [Submit] button is clicked, view of "Download Files" is appeared.

Click the button of PDF file of application to download.

Examine the PDF and if there are incorrect data or oversight, login the web system, amend and submit again.

If there are no incorrect data, click "OK" button to log out.

If there is no problem in the PDF,
please click "OK" to log-off.

Finally, Print out the PDF file, sign and send it with other necessary documents to Local Secretary.

If PDF is not downloaded after clicking "Submit", please check and allow pop-ups.
In case of Google Chrome, please refer the followings:



If you find types or mistakes, please fix them at Step 1~3 and click "Submit" button at Step 3 again.
If you are timed out while you are checking PDF, please log-in again.



DATE: _____

APPLICATION FOR FELLOWSHIP

To Chairman of the Board of Trustees
Takeda Science Foundation

1. Data on Applicant

Age/Sex: _____ / _____

Name: _____ (Family Name) _____ (First Name) _____ (Middle Name)

Date and Place (city) of Birth: _____

Permanent Address: _____

Home Address: _____
(Postal Code) _____

Name of Hosp., Univ. etc.: _____

Section & Position: _____

Office Address
(Postal Code): _____

Phone No.: _____ Fax No.: _____

E-mail: _____

Signature: _____**2. Outline of the Study in Japan:** _____**3. Period of Study:** _____ months from (M) _____ (Y) _____ to (M) _____ (Y) _____**4. Research Institute in Japan:**

Name: _____

Place/Tel/Fax: _____

Mentor's Name & E-mail: _____

JOINT SURETIES:

Name/Date of Birth: _____

Occupation : _____

Present Address: _____

Relationship with Applicant: _____

Signature: _____

Name/Date of Birth: _____

Occupation: _____

Present Address: _____

Relationship with Applicant: _____

Signature: _____

Additional Information for APPLICATION

I) Followings are Supplemental Information, in case the space of Page 1 is not enough.

II. Questions from Takeda Science Foundation (TSF)

(These answers do not affect the selection judgement. They are just for information to be used in the Application for Certificate of Eligibility, if required.)

1. Marital Status: Married / Single

2. Passport: I have (please attach copy) / I don't have (at the moment)

Number: _____

Date of Issue: _____

Date of Expiration: _____

Issuing Authority: _____

3. Past Entry into/Stay in Japan: Yes / No Time(s): _____

Last Entry: From (Y/M/D) to (Y/M/D)

4. Accompanying Person: Yes / No (If any, please submit by separate paper the following information: Relationship, Name, Date of birth, Nationality, Residing with applicant or not, Place of employment, Status of residence.)

5. Family, Relatives or Co-residents in Japan: Yes / No (If any, please submit the same information requested in above 4.)

6. Criminal Record (in Japan or overseas): Yes / No

Yes (Details: _____)

7. Place (city) to apply for Visa: _____

8. Int'l Airport where to depart from: _____

Date: _____

Signature: _____

To Chairman of the Board of Trustees
Takeda Science Foundation

Statement of the Physician who examined the Applicant:

Physician's Name: _____

Physician's Address: _____

Physical conditions of the patient are diagnosed as follow:

Name of Patient: _____, Sex: Male or Female

Date of Birth: _____, Age: _____

Medical History:

Family's Health: Father: _____, Mother: _____, Brother: _____

Sister: _____, Wife (Husband): _____, Children: _____

Height: _____ cm., Visual Acuity: Left: _____, Right: _____

Weight: _____ Kg., Hearing Acuity: Left: _____, Right: _____

Chest Measurement: _____ cm., Color Sense: _____

Blood Pressure: _____ Blood Test: RBC: _____, WBC: _____, Hct: _____

Systolic _____ mmHg. Hb: _____, Platelet: _____

Diastolic _____ mmHg. GOT: _____, GPT: _____, γ -GPT: _____

X-Ray filming of the Chest: Done on (Date): _____, Film No.: _____

Findings: _____

Physical Diagnosis: Done on (Date): _____, Temperature: _____ C

Physique: _____, Nutrition: _____

Findings: _____

Other Tests: _____

Examination of Urine: Albumin: _____, Sugar: _____, Urobilinogen: _____

Evaluation(General): _____

Evaluation (SARS): _____

Signature of Physician: _____

(For use by the Foundation)

Decision on Acceptability:

Photo

(40 x 30 mm)

CURRICULUM VITAE

Name: _____

Home Address: _____

Phone/Fax Nos. _____

E-mail: _____

1. Educational History (From High School)

Period (Month/Year) _____ School's Name _____ Place (City) _____

From: _____ To: _____

2. Occupational History (including Research Activity)

Period (Month/Year) _____ Institution's Name & Position _____ Place (City) _____

From: _____ To: _____

3. Conferred Degree:

Degree _____ Year _____ Conferred by _____

4: Visit to Japan in the Past:

Date (Day/Month/Year) _____ Main City Visited _____ Main Purpose _____

From: _____ To: _____

Date of Signature: _____ Signature: _____

WRITTEN PLEDGE

To Chairman of the Board of Trustees
Takeda Science Foundation

Having received a Research Grant from your Foundation in compliance with the Regulations on the Fellowship Programs for the Foreign Researchers, I hereby pledge to do my utmost in my scientific pursuits, fully aware of the significance of the grant, and to observe the laws and regulations of Japan as well as rules and regulations of the research institute concerned in Japan, during my stay in Japan.

I also pledge to

- 1) submit to the Foundation a research report at the conclusion of my grant period;
- 2) visit the Foundation before the conclusion of my grant period, to present an oral report, and, if such a visit cannot be made, provide notification of the reason in advance;
- 3) inform the Foundation of my plans for a trip back to my country of residence using the prescribed form; and
- 4) inform the Foundation of any unavoidable temporary return trip.

Moreover, I shall notify the Foundation without delay of any of the following:

- 1) My intention to reduce the grant period stipulated by the Foundation and return to my home country earlier than indicated;
- 2) My intention to extend my period of stay in Japan beyond the expiration of the grant period as stipulated by the Foundation;
- 3) My intention to change my research institute, place of research or residence.

Done on this _____ day of _____ in the year _____
under the joint signature of the Guarantors.

Awardee:

Name: _____

Signature: _____

Guarantor for Awardee:

Name: _____

Occupation: _____

Address: _____

Relationship: _____

Signature: _____

Name: _____

Occupation: _____

Address: _____

Relationship: _____

Signature: _____