



REGISTRATION FORM

REFERRED BY: _____

1. Family Name:	2. First Name:
3. Middle Name:	4. Gender: Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/>
5. Father's Name:	6. Mother's Name:
7. Date of Birth – dd/mm/yyyy:	8. Place of Birth:
9. Nationality:	10. Marital Status:
11. Education:	12. Diplomas:
13. Main Profession:	14. Fluent Language(s):
15. National ID / Passport - Number:	16. National ID / Passport – Issuing Country:
17. National ID / Passport – Issuing Date:	18. National ID / Passport – Expiry Date:
19. Home Address:	20. Email Address:
21. Cell Phone Number:	22. Facebook / LinkedIn Profile Name:
23. Do you want to open a RUKOA Franchise in your Country? YES <input type="checkbox"/> NO <input type="checkbox"/>	24. Do you want to be part of our Affiliate Marketing Team? YES <input type="checkbox"/> NO <input type="checkbox"/>

I declare that the information supplied on this form is complete, correct and up-to-date in every detail. I understand that if I have given false or misleading information, my application may be refused. I undertake to inform the Royal University of The Kingdom of Atlantis of any changes while my application is being considered. I declare that I have read and understood the information supplied to me, in particular the policy regarding the non-refund of donations made to Royal University of The Kingdom of Atlantis.

Date:	Signature:
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HONORARY DOCTORATE'S DEGREES LIST

- | | |
|----------------------------|--|
| 01 DOCTOR OF METAPHYSICS | 19 DOCTOR OF SPIRIT, MIND BODY THERAPY |
| 02 DOCTOR OF VEDIC SCIENCE | 20 DOCTOR OF LIFE EXTENSION THERAPY |
| 03 DOCTOR OF THEOLOGY | 21 DOCTOR OF ALTERNATIVE MEDICINE |
| 04 DOCTOR OF DIVINITY | 22 DOCTOR OF STEM CELL THERAPY |
| 05 DOCTOR OF SPIRITUALISM | 23 DOCTOR OF GOVERNMENT ADMINISTRATION |
| 06 DOCTOR OF HUMANITY | 24 DOCTOR OF BUSINESS ADMINISTRATION |
| 07 DOCTOR OF PHILOSOPHY | 25 DOCTOR OF BUSINESS DEVELOPMENT |
| 08 DOCTOR OF ETHICS | 26 DOCTOR OF PROJECT MANAGEMENT |
| 09 DOCTOR OF PSYCHOLOGY | 27 DOCTOR OF ARCHITECTURAL STUDIES |
| 10 DOCTOR OF EDUCATION | 28 DOCTOR OF DESIGN STUDIES |
| 11 DOCTOR OF CULTURE | 29 DOCTOR OF INFORMATION TECHNOLOGY |
| 12 DOCTOR OF LITERATURE | 30 DOCTOR OF ARTIFICIAL INTELLIGENCE |
| 13 DOCTOR OF FINE ARTS | 31 DOCTOR OF DIPLOMACY AND PEACE |
| 14 DOCTOR OF MUSIC | 32 DOCTOR OF INTERNATIONAL RELATIONS |
| 15 DOCTOR OF SOCIAL WORK | 33 DOCTOR OF SUSTAINABLE DEVELOPMENT |
| 16 DOCTOR OF SCIENCE | 34 DOCTOR OF SOCIAL STUDIES |
| 17 DOCTOR OF MARKETING | 35 DOCTOR OF ENVIRONMENT STUDIES |
| 18 DOCTOR OF SPORTS | 36 DOCTOR OF ECONOMIC STUDIES |
| | 37 OTHERS DOCTORATE'S DEGREES |

Kind regards,

A handwritten signature in blue ink, appearing to read 'Michael Puzzolante'.

Prof. Dr. Michael Puzzolante
Chancellor
Royal University of The Kingdom of Atlantis





PAYMENT SOLUTIONS

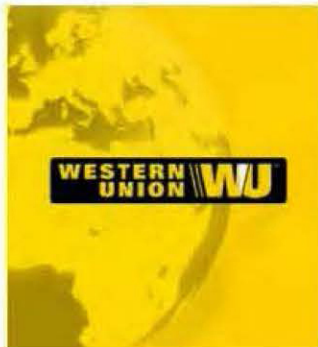
1- PAYPAL – puzzolante.michael@protonmail.com



puzzolante.michael@protonmail.com



2- WESTERN UNION – PUZZOLANTE MICHELE



SURNAME:	PUZZOLANTE
FIRST NAME:	MICHELE
PASPPORT No:	YB1084529
CITY:	SUKABUMI
COUNTRY:	INDONESIA
PHONE:	+62 858 1013 5254
PURPOSE:	DONATION

3- BANK TRANSFER INDONESIA



BANK NAME:	BANK BRI
ACCOUNT NAME:	PUZZOLANTE MICHELE
ACCOUNT NUMBER:	0181-01-000807-56-9
SWIFT CODE:	BRINIDJAXXX

Kind regards,

Prof. Dr. Michael Puzzolante
Chancellor
Royal University of The Kingdom of Atlantis





DOCUMENTATION

Please attach to your message the following documents:

1. Copy of your Passport or National ID.
 2. Copy of your Resume showing at least 15 years experience in your Specialty.
 3. Copy of Proof of Payment.
 4. Title of your Honorary Doctorate's Degree (Ex: Doctor of Education)
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Kind regards,

A handwritten signature in blue ink, appearing to read "Michael Puzzolante", written over a horizontal line.

Prof. Dr. Michael Puzzolante
Chancellor
Royal University of The Kingdom of Atlantis

