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| **PERSONAL INFORMATION** | | | | | | | | | | | | | | | |
| Title:  (Mr./Ms./Mrs) | | | |  | | | | | | | | | | | |
| Given Name: | | | |  | | | | | | | | | | | |
| Middle Name:  (If any) | | | |  | | | | | | | | | | | |
| Family Name: | | | |  | | | | | | | | | | | |
| Passport: | | |  | | | | | | | Expiry date:  (DD/MM/YYYY) | | |  | | |
| Nationality: | | |  | | | | | | | Date of Birth:  (DD/MM/YYYY) | | |  | | |
| Native language: | | | | |  | | English |  | Other: Please specify | | | | |  | |
| For non-native speaker of English, please specify your English test score | | | | | | | | | | | | | | | |
|  | TOEFL: score | | | |  | | | | |  | TOEIC: score | | |  |
|  | IELTS: score | | | |  | | | | |  | Others: score | | |  |
| Allergy: | | | |  | | | | | | | | | | | |
| Email Address: | | | |  | | | | | | | | | | | |
| Phone Number: | | | |  | | | | | | | | | | | |

Photo

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| **ACADEMIC INFORMATION** | | | | | | | | |
| Home Institution: | | |  | | | | | |
| Country: | | |  | | | | | |
| Level: |  | Bachelor’s Degree | | |  | Master’s Degree |  | Doctoral Degree |
| Field/Program of Study: | | | |  | | | | |
| Name of Coordinator: | | | |  | | | | |
| Email Address: | | | |  | | | | |

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| **APPLICATION FOR** | | | | | | | | | | |
| Semester: | | | |  | 1st semester (Aug.-Dec.) | | | | | |
|  | | | |  | 2nd semester (Jan.-May) | | | | | |
|  | | | |  | Summer session (Jun.-Jul.) | | | | | |
| Begin Date:  (DD/MM/YYYY) | | |  | | | | | | End Date:  (DD/MM/YYYY) |  |
| Type: |  | Semester Exchange | | | | | | | | |
|  |  | Non-degree | | | | | | | | |
|  |  | Internship | | | | | | | | |
|  |  | Short-term Activity:  Please specify | | | | | |  | | | |
|  |  | Research: Entitled | | | | |  | | | |
| Faculty/School at KMUTT: | | | | | | Choose an item. | | | | |
| Field/Program of Study at KMUT: | | | | | | | |  | | |

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| **EMERGENCY CONTACT** | | | |
| Name-Surname: |  | | |
| Relation: |  | | |
| E-mail address: |  | | |
| Phone number: |  | Country: |  |

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| **IF YOU ARE ACCEPTED TO KMUTT** | | | | | | |
| 1. You are going to apply for student visa at Royal Thai Embassy/Consulate in | | | | | | |
| City/State: |  | | | Country: |  | |
| (See more details at http://www.thaiembassy.org/main/) | | | | | | |
| 2. We shall send a Letter of Acceptance (LoA) and a supporting letter for your visa application to the following address for correspondence.  *(For semester exchange students, the letters will be sent to your coordinator at your home institution so please provide the coordinator’s name and your home institution address).* | | | | | | |
| Name-Surname: | | |  | | | |
| Address: |  | | | | | |
| City/State: |  | | | Country: | |  |
| Postal code: | |  | | | | |

**DECLARATION:** I declare that the above information is true. I understand that the University reserves the right to vary or reverse any decision regarding admission or enrolment made on the basis of incorrect information.

Applicant’s Name/SignatureDate

**Checklist of requirements**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Document** | **Exchange** | **Non-degree** | **Internship** | **Short-term Activity** | **Research** |
| 1 | Completed application form | ✓ | ✓ | ✓ | ✓ | ✓ |
| 2 | A readable copy of passport (valid for not less than 6 months from the date of arrival in Thailand and blank pages) | ✓ | ✓ | ✓ | ✓ | ✓ |
| 3 | Letter of Nomination issued by your institution | ✓ |  |  |  |  |
| 4 | A copy of transcript | ✓ |  | ✓ |  |  |
| 5 | A medical certificate issued not before 1 month prior to application date | ✓ |  |  |  |  |
| 6 | Learning agreement | ✓ |  |  |  |  |
| 7 | English language proficiency test or Recommendation Letter (for non-native speaker of English) | ✓ |  | ✓ |  |  |
| 8 | Portfolio with explanation about your interested research area |  |  | ✓ |  |  |

Please submit all required application documents **EITHER**

• By email to [orginter@mail.kmutt.ac.th](mailto:orginter@mail.kmutt.ac.th)

**OR**

• By mailing to

International Affairs Office

King Mongkut’s University of Technology Thonburi

126 Pracha-u-thit Road, Bangmod, Thungkru, Bangkok 10140 THAILAND

Tel: +66 2470-8342, +66 2470-8344, +66 2470-8346

Fax: +66 2470-8346