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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

**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