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Not older than

6 months

**KASETSART UNIVERSITY**

**APPLICATION FOR ADMISSION**

International Studies Center (ISC), Office of the Registrar, Kasetsart University

50 Ngam Wong Wan Road, Chatuchak, Bangkok, 10900 THAILAND

or P.O. Box 1097 Bangkok 10903 THAILAND

Tel: +66 0 2118-0137 ext. 61 8301-6 Fax: +66 0 2562-0985

E-mail: ku.oip@ku.ac.th Website: http://www.interprogram.ku.ac.th/

**PLEASE TYPE OR CLEARLY PRINT AND TICK APPROPRIATE BOX**

**PART 1 : PERSONAL INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **NAME** | Mr / Ms / Mrs. ………………..…………..… …….…………..……………… ……………….……..  Last First Middle   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | / |  |  | / |  |  |  |  |   Date of Birth: (dd/mm/yyyy)  Passport No: …………….………..……………… Nationality ……………………………………….  Expire Date (dd/mm/yyyy) ………………..…….. Blood Group …..………………….………………  Marital Status ❑ Single ❑ Married ❑ Other …………………………………………………… |
| **APPLYING FOR**  **❑ Full-Degree**  **(complete #1)**  **❑ Exchange/**  **Summer Course/**  **One Semester Package Program**  **(complete #2)**  **❑ Training Program/ Internship**  **(complete #3)** | **#1**    ❑ Bachelor Degree ❑ Master Degree ❑ PhD  Academic Year ………..…….  ❑ 1st semester (starting in August) ❑ 2ndsemester (starting in January)  Program Name…………………………….………………………………………... Code………Study Plan……  (Program Code and Study Plan ONLY applied for graduate programs)  --------------------------------------------------------------------------------------------------------------------------------------  **#2**  ❑ Bachelor Exchange ❑ Master Exchange ❑ PhD Exchange    ❑ Kasetsart University Student Exchange Program (KUSEP)  ❑ Kasetsart University Summer School (KUSS)  ❑ One Semester Package Program (please specify)………………………………………..…………...  …………………………………………………………………………………………………………...    Program Duration: From \_\_ \_\_/\_\_ \_\_ \_\_ \_\_ until \_\_ \_\_/\_\_ \_\_ \_\_ \_\_  (mm/yyyy) (mm/yyyy)  Home University Information:  Home University ………..…………………………………………………..……………………………  Department ……………..………………………………………..…………………………………….…  Faculty ………………….………………………………………..……………………………………….  Address …………………………………………………………………………………………………...  Country …………………………………………………………………………………………………...  Coordinator ………………………………………………………Email:……………...………………...  Study Program ……………………………………….…………………………………………………...  Host University Information: KASETSART UNIVERSITY  Department ……………..…………………….……………………………..……………………………  Faculty ………………….……………………………….…………………..……………………………  A Name of Program Coordinator ……...…………………..……………………………….…………….  --------------------------------------------------------------------------------------------------------------------------------------  **#3**    ❑ Training program ❑ Internship  Program Duration: From \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ \_\_ \_\_ until \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ \_\_ \_\_  (dd/mm/yyyy) (dd/mm/yyyy)  Host Department …………………..…………………………………...…………………………………  Faculty ……………………………………..…………………………………………………...…………  Training / Internship Topic….…………………………..………………………………………………...  Name of Program Coordinator …….……………………………………………………………………... |

**PART 2 : CONTACT DETAIL**

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| **CONTACT ADDRESS** | Postal Address…..……………………………………………………………………………………………….....  City…………………….…………………………Postcode……….…….…..Country……......…………………..  Tel: …….…………………………………..…………… Fax:…………………………….…...…………...……..  E-mail……………………………………………….…………………………….................................………….. |
| **CONTACT PERSON**  **(For emergency)** | Mr / Mrs / Ms. …………………..……..………… ……………...…………………… ..………………....……...  Last First Middle  Address ………….…………………………………………………………………………………………………..............  City…………………………………………….Postcode……….…....…..Country…….………………...……….  Tel: …….…………………………………… Fax: …..…………………………………………………..………..  E-mail……………………………………………………Relationship with applicant...........……………………. |

**PART 3 : ACADEMIC RECORD**

Please indicate your record of achievement in High School Certificate / Diploma, Bachelor Degree, Master Degree and / or any other advanced university program.

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| **Degree Level** | **Institution & Country** | **Graduate Date (dd/mm/yyyy)** | **Grade**  **Point Average** | **Major/Subject** |
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**PART 4 : PLAN FOR STUDY**

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| Indicate division or field of study you are applying for  ……………………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………… |
| Define your purpose in studying at Kasetsart University  ……………………………………………………………………………………………………………………………………………  ……………………………………………………………………………………………………………………………………………  …………………………………………………………………………………………………………………………………………… |

**PART 5 : RELEVANT INFORMATION**

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| **LANGUAGE**: Is English your mother tongue?❑Yes❑No  (Applicant whose mother tongue is not English are required to submit reference of English language)  **ENGLISH PROFICIENCY:** Written ❑ excellent ❑ good ❑fair ❑ poor Spoken ❑ excellent ❑ good ❑fair ❑ poor  **CERTIFICATE OF ENGLISH PROFICIENCY:** ❑ IELTS ❑ TOEFL ❑ Other……………..…………………..…………….  Certificate of English test or reference of English language  ❑ is attached   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | ❑ will be sent by(mm/yyyy) | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | |  |  | / |  |  |  |  | | |  |  | |
| **INSURANCE**  This is to confirm that □ I have a health insurance covering the period of my study program. (Evidence required)  □ I will apply for a group insurance via ISC on my arrival.  □ Other, (please specify)……………………………………………………………………………………. |
| **FINANCIAL STATEMENT**  This is to certify that □ I will be fully responsible for tuition, fees, living expenses and others.  □ I am applying for the program under MOU between my university and Kasetsart University.  □ I am applying for a scholarship named………………………………………………………………………….  Offered by ………………………………………………………………………………………………………...  □ I am a scholarship holder. My scholarship grantor is ….……………………………………………………….  Contact person of my scholarship ………………………………….……………………………………………..  Address……………………………………………………………….…………………………………………....  City………………………..…………Postcode………....…..Country……...……………..….…………………..  Tel: …….……………………………………E-mail……..……………………………………………………….  □Other, (please specify)………………………………………………………………………………………….. |
| **REQUIRED DOCUMENTS CHECKLIST**   |  | | --- | | **All Applicants MUST provide following documents:**  1. Complete Application Form 2. A scan of passport 3. Curriculum Vitae (CV)/Resume 4. Proof of English proficiency  5. A scan of Health & Travel Insurance card/document (if applicable) 6. A photo (passport size) not older than 6 months  **Additional Documents for Full-Degree Program Applicant:**  ❑ A conceptual proposal for graduate applicant (3-4 pages) ❑ 3 Recommendation Letters from 3 reference persons  ❑ IELTS overall score 5.0 or equivalents TOEFL ❑ A scan of certified scholarship award letter (if applicable)  ❑ Scan of original degree certificate and complete transcript of Bachelor’s and Master’s with authorized English translation  (for graduate applicant)  ❑ Scan of original high school transcript record or equivalent with authorized English translation (for undergraduate applicant)  **Additional Documents for Exchange Program/Summer Course/Package Program/Training program/Internship/ Applicant:**  ❑ A motivation letter ❑ A Recommendation Letter from home institution  ❑ A scan of official transcript of your current degree in English language  ❑ A scan of an official consent letter from home institution verifying you as an exchange student  ❑ A scan of certified scholarship award letter with your name mentioned as a grant holder (if applicable) |   **- NOTE -**   * Recommendation Letter can be genuinely issued from, for example, academic’s advisor, lecturer, Head of Department, etc. with official emblem and original autograph. * Native English speaker does not need to provide any proof of English proficiency. * Applicant applying for a Regular Program that conducted in Thai language does not need to provide any proof of English proficiency, however, need to provide an evidence of sufficient Thai language skills. * An official transcript issued by the institution you graduated from must be a complete version clarifying a record of all courses you have taken in each academic semester along with date of graduation, credits and grades. * If your degree certificate does not clearly state which degree level you graduated with please consult with your university to issue a certified letter confirming that your certificate is equivalent to bachelor’s degree or master’s degree. * Applicant must submit a complete application with all required documents to ku.oip@ku.ac.th at least 3 months before the semester starts.   \*\*\* Incomplete application or missing of required documents will not be considered. \*\*\* |
| □ I have read and accepted the above acknowledgement.  Applicant’s signature ………………………………………..…………..…… Date (dd/mm/yyyy) ………………...……… |
| For any further information, please contact:  International Studies Center (ISC), Office of the Registrar, Kasetsart University  50 Ngam Wong Wan Road, Chatuchak, Bangkok, 10900 Thailand  Tel.: +66 0 2118-0137 Fax: +66 0 2562-0985  E-mail: ku.oip@ku.ac.th  Website: <http://www.interprogram.ku.ac.th/> |