

Application Form: Inbound
Scholarship
Maharakham University

Section 1: Personal Information

1.1 Applicant Information

- Name-Surname (Thai):

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- Name-Surname (English):

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- Date of Birth: Age:

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- Nationality:

- Passport Number:

- Current Address:

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- Mobile: Email:

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- Emergency contact person:

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- Relationships:

Mobile:

1.2 Current study data

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- Education Level: ☐ bachelor's degree ☐ master's degree ☐ doctoral degree

- Faculty:

Major:

- Institution Name:

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- Country:

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- Year Class: Student ID:

.....

1.3 Language Proficiency

Thai Language Proficiency Level:	English Language Proficiency Level:
● Speaking: ○ Excellent ○ Good ○ Fair ○ Poor ● Reading: ○ Excellent ○ Good ○ Fair	● Speaking: ○ Excellent ○ Good ○ Fair ○ Poor ● Reading: ○ Excellent ○ Good ○ Fair

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- o Poor ● Writing: - o Excellent - o Good - o Fair - o Poor	- o Poor ● Writing: - o Excellent - o Good - o Fair - o Poor
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Part 2: Information on the Faculty/Field of Study

2.1 Faculty/Field of Study

- Faculty/ Department:

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- Study Duration: Duration.....days From Day

..... to Day

- Type of Study:

☐ exchange

☐ training

☐ research

☐ others (specified)

2.2 Institution Contact Information (applicant's institution)

- Coordinator Name:

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.....

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- Position:

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- Email:

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- Phone:

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Part 3: Application Documents

- ☐ Copy of passport
- ☐ Copy of academic transcript
- ☐ Letter of acceptance from the institution to study
- ☐ Curriculum vitae (CV)
- ☐ Statement of purpose

Testimonials

I certify that the above statement is true in all respects. If any statement is found to be false, the investigation will be conducted in the following cases. I am willing to disqualify you from receiving the scholarship and I am willing to reimburse you for all the scholarship.

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In addition, I hereby certify that I am financially capable of bearing all expenses incurred during my study at Maharakham University that are not covered by the scholarship, including but not limited to living expenses, accommodation, insurance, travel, and other personal expenses.

Candidate Sign:

Full name:

Date:

Advisor Sign:

Full name:

Date:

Dean Sign:

Full name:

Date:

For Staff

Application No.:

Date of receipt of documents:

Recipient:

NOTE: