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| E:\สื่อสิ่งพิมพ์-ออกแบบ\ภาพประกอบ (พื้นหลัง)\ตราคณะ\19511851_1478141345582560_364863336_n.jpg**E:\สื่อสิ่งพิมพ์-ออกแบบ\Logo copy.JPG คณะศิลปศาสตร์และวิทยาการจัดการ**  **Faculty of Liberal Arts and Management Science**  **LAMS - International Exchange Program Application Form**  **Please Type Your Information in The Space Provided Below** | | | | | | **Photo** |
| **PERSONAL DETAIL** | | | | | | |
| First name | | Last name | | | | Gender  Male Female |
| ชื่อ (ภาษาไทย) | | นามสกุล (ภาษาไทย) | | | | ชื่อเล่น |
| Date of birth | | Passport number (If any) | | | | Expired date |
| **ACADEMIC BACKGROUND** | | | | | | |
| Name of your program | | | | Student ID number | | |
| Name of your advisor | | | | GPA | | Year of study |
| Language competency  English Chinese other\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Fair Good Fluent Excellent | | |
| TOEIC Score: | | Other English Assessment (ie. IELTS, TOEFL): | | | | |
| If you have not an English assessment score, would you like to attend TOEIC test? Yes No | | | | | | |
| Extra activities | | | | | | |
| **CONTACT INFORMATION** | | | | | | |
| Home Tel. No. (student) | Mobile No. (student) | | E-mail (student) | | | |
| Parent’s name | | | Relationship | | | |
| Home Tel. No. (Parent) | Mobile No. (Parent) | | E-mail (Parent) | | | |
| **INTERNSHIP INFORMATION** | | | | | | |
| Purpose of exchange program  Internship (duration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) Cooperative program (duration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)  Research (duration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) Conference (duration\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) | | | | | | |
| List of your interests institutions for training (in order of preferences) | | | | | | |
| Name of university / institution | | Country | | | | |
| 1. | |  | | | | |
| 2. | |  | | | | |
| Have you ever been abroad? Yes No (If yes, where and what was the purpose of the trip? | | | | | | |
| Why do you prefer to have an international exchange program? (attached extra pages) | | | | | | |
| I certify that I have read and understood all questions in this application and the answers I have furnished on this form are true and correct. I understand that any false or misleading statement may result in the refusal of exchange | | | | | | |
| APPLICATION’S SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | DATE (dd-mm-yyyy)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Acknowledged and approved by** | | | | | | |
| ADVISOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | DATE (dd-mm-yyyy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Internship coordinator signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | DATE (dd-mm-yyyy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |