

APPLICATION FORM

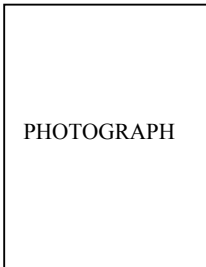
PLEASE USE BLOCK LETTERS

FAMILY NAME _____

GIVEN NAMES _____

PERMANENT HOME ADDRESS _____

TEL _____



MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

TEL _____ FAX _____ (IF ANY)

E-MAIL ADDRESS _____ (IF ANY)

YOUR ADDRESS IN THAILAND (IF ANY) _____

_____ TEL _____

SEX FEMALE MALE

DATE OF BIRTH _____ / _____ / _____
 (DAY / MONTH / YEAR)

MARITAL STATUS SINGLE MARRIED OTHER

RELIGION _____

NATIONALITY _____

PASSPORT NUMBER/ID NUMBER _____

VALID UNTIL (DAY/MONTH/YEAR) _____ / _____ / _____

COUNTRY OF ISSUE _____

NAME OF PARENT/GUARDIAN _____

ADDRESS _____

EDUCATIONAL BACKGROUND

LEVEL OF EDUCATION	NAME OF INSTITUTION AND COUNTRY	COURSE / MAJOR	DATES ATTENDED mo/yr - mo/yr	GRADE OBTAINED
SECONDARY SCHOOL				
HIGH SCHOOL / EQUIVALENT				
DIPLOMA				
BACHELOR DEGREE				

ENGLISH TESTS TAKEN	SCORE	DATE TAKEN
<input type="checkbox"/> TOEFL	_____	_____
<input type="checkbox"/> GCE	_____	_____
<input type="checkbox"/> IELTS	_____	_____
<input type="checkbox"/> OTHER (SPECIFY) _____	_____	_____

**AMERICAN UNIVERSITY PROGRAM WITH TROY STATE UNIVERSITY:
BACHELOR OF SCIENCE IN BUSINESS ADMINISTRATION (BSBA)**

INFORMATION SYSTEMS INTERNATIONAL BUSINESS MARKETING

**BRITISH UNIVERSITY PROGRAMME WITH COVENTRY UNIVERSITY
BACHELOR OF SCIENCE (HONS.) B.Sc. (Hons)**

COMPUTER SCIENCE SOFTWARE ENGINEERING

ST THERESE INTI INTERNATIONAL PROGRAM: Full Time / Part Time

BACHELOR OF BUSINESS ADMINISTRATION (BBA): Marketing / Accounting / Bus. Computer / Management

BACHELOR OF ARTS IN BUSINESS ENGLISH: Full time

OTHERS

DO YOU HAVE ANY MEDICAL CONDITIONS THAT REQUIRES THE ATTENTION OF THE COLLEGE?
(IF YES PLEASE SPECIFY)

PERSON TO CONTACT IN CASE OF EMERGENCY

NAME _____ TEL _____

ADDRESS _____

DO YOU WISH TO APPLY FOR A DORMITORY?

YES NO IF YES, PLEASE SPECIFY THE DATE _____

I certify that the information provided is true in all respects. I understand that any misrepresentation on my part may result in refusal of admission

Signature: _____ Date ____ / ____ / ____

(_____)

OFFICE USE ONLY

CHECKLIST (PLEASE INDICATE THE ITEMS ENCLOSED WITH THIS APPLICATION)

<input type="checkbox"/> APPLICATION FEE 75.00 USD/3,000.00 BHT	<input type="checkbox"/> CERTIFIED COPIES OF TRANSCRIPTS	<input type="checkbox"/> PHOTOCOPY OF PASSPORT
<input type="checkbox"/> TESTIMONIALS	<input type="checkbox"/> CERTIFIED COPIES OF ENGLISH TEST RESULTS	<input type="checkbox"/> THREE (3) PASPORT- SIZED PHOTOGRAPH

OTHERS (SPECIFY) _____

APPLICATION RECEIVED (DAY/MONTH/YEAR) ____ / ____ / ____

DOCUMENTS MISSING (SPECIFY) _____

RESULT OF APPLICATION

ACCEPTANCE REJECTION ENGLISH PLACEMENT TEST REQUIRED

CONDITIONAL ACCEPTANCE

REMARKS _____

APPROVED BY _____ DATE ____ / ____ / ____