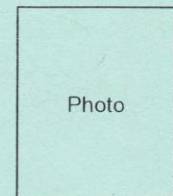




SHINAWATRA UNIVERSITY

APPLICATION FORM



Application No.

Before submitting the application form, please check if you attached a complete set of application materials. Then, forward the application form to Shinawatra University. The application process will be completed upon the receipt of application materials.

PROGRAM OF STUDY:

- Bachelor:** Business Administration (BBA) English for Communication (BAEC) Management Technology (BSMT)
 Computer Engineering (BECE) Computer Science (BSCS)
- Master:** Business Administration (MBA) Information Technology (MSIT)
 Management Technology (MSMT) Teaching English as an International Language (MEdTEIL)
- Doctoral:** Management Science (PhD-MS) Information Technology (PhD-IT) Management Technology (PhD-MT)

SEMESTER APPLIED FOR: Semester 1 Semester 2

PERSONAL INFORMATION:

Title: Mr. Miss Mrs.

First Name: _____ Middle Name: _____ Last Name: _____

Place of Birth: _____ Date of Birth: _____ Nationality: _____

Native Language: _____ Citizen ID Number/ Passport Number: _____

Date of Issue: _____ Date of Expiry: _____

FAMILY INFORMATION:

Name	Age	Occupation	Place of Work	Relationship

CHANNEL OF KNOWING SHINAWATRA UNIVERSITY:

CONTACT ADDRESS:

Address: _____

Province/City: _____ Country: _____ Postal Code: _____

Tel: _____ Fax: _____ Mobile: _____

E-mail Address: _____

ACADEMIC BACKGROUND:

Please fill in the previous highest academic institution and certificate, diploma or degree awarded. Also include original or certified copies of your transcript with the application.

Institution: _____ Language of Instruction: _____

Address: _____

Admission Date (Month/Year): _____ Graduation Date (Month/Year): _____

Certificate/Degree/Diploma Awarded: _____ GPA: _____

LANGUAGE PROFICIENCY TEST:

Please specify the scores & date of any test taken and enclosed a copy of official test score with this application:

- TOEFL Date Taken: _____ IELTS Date Taken: _____
- Others (Specify) Date Taken: _____ Have not taken any test.

CERTIFICATION OF TRUE STATEMENT:

I do certify that I have read all the instructions and that the information I have provided on this application form and on any additional material related to the admission process is true and complete. Subsequently, I understand that misrepresentation may cause canceling of my admission. All credentials and documents I submit will eventually become the property of Shinawatra University.

APPLICANT SIGNATURE: _____ **DATE:** _____

PLEASE SEND APPLICATION MATHERIALS TO:

Admissions and Development Division, Shinawatra University
 99 Moo 10, Bangtoey, Samkhok, Pathum Thani 12160 THAILAND
 Phone: +66 2599 0000 Press 2 Fax: +66 2599 3351
 E-mail : amd@siu.ac.th Website: <http://www.siu.ac.th>

DOCUMENT CHECKLIST:

- Application Form
- Copy of high school transcript and certificate
- Copy of citizen ID card / Passport
- Copy of house registration (Thai Only)
- Proof of English language competency
- Other.....