



Higher Education (if any)

Fast Track Undergraduate Scholarship for International Students The Design, Business and Technology Management Program (DBTM)

Academic Year 2023

1. Personal Informa	tion		
Name (Mr./ Miss/ Mrs.)			
Middle Name			Photo
Family Name			
Passport Number	Date of Birth	Birthplace	
Age:Natio	onality:	Religion:	
Telephone:	Mobile Phone:	Email Address:	
Permanent Address:			
Street:	City/Di:	strict:	
State/Province:	Country:	Postal	Code:
Current Address:			
Street:	City/Di:	strict:	
State/Province:	Country:	Postal	Code:
Emergency Contact Person:		Relationship:	
Phone Number:		Email Address:	
2. Educational Back	ground		
	•		
Level of Education	School / Institution Nam	e Country	GPA
Middle School			
High School			

## 3. Scholarship Attainment

Scholarship Title	Level of Education	Amount (year)
4. English Proficiency Test Scores		
TU-GET:	TOEFL:	
IELTS:	New SAT:	
GSAT:		
5. Extracurricular Activities		
ic Activities		
terests Activities		
Activities		
	4. English Proficiency Test Scores  TU-GET:  IELTS:  GSAT:  5. Extracurricular Activities  ic Activities  Activities	4. English Proficiency Test Scores  TU-GET: TOEFL:  IELTS: New SAT:  5. Extracurricular Activities  ic Activities  Activities

7. Family Background					
Father; Name			O Living; Age		O Deceased
Phone Number		Marital Status	O Married O	Separated	<b>O</b> Divorced
Occupation		Position / Ran	k		
ob Description					
Vorkplace		Country of Wo	rkplace		
ncome	THB/Month	Debt		THB/Year	
Mother; Name			O Living; Age		<b>O</b> Deceased
hone Number		Marital Status	O Married O	Separated	<b>O</b> Divorced
Occupation		Position / Ran	k		
ob Description					
/orkplace		Country of Wo	rkplace		
ncome	THB/Month	Debt		THB/Year	
8. Family's Living & Fi	inancial Conditions				
ivelihood					
ivelihood  Applicant is living with	O Father & Mother	<b>O</b> Father	O Mother	<b>O</b> Gua	rdian
ivelihood  Applicant is living with	• Father & Mother  Others (please specify):				
			_Relationship:		
	Others (please specify):		_Relationship:		

ial Sponsc	O Owned	Control Living with Relative	ves O Rent		THB/Month
ial Sponsc					
ial Sponso					
-	r				
	O Father & Mothe	er <b>O</b> Father	O Mother	O Self-Sponsored	O None
	Other: (Name)			Relationship:	
9. App	olicant's Total Mon	thly Incomes		Total Monthly Expen	ses
10. Refe	erences				
Name –	Surname (Mr./ Ms./	Mrs.)		Relationship:	
Address:					
Street:			City/District:		
State/Pro	ovince:	Co	ountry:	Postal Code:_	
Telepho	ne:		Email:		
Income:		THB/Montl	h. Debt (Approximat	ely):	THB/
	I hereby certify tha	the above informat	tion is true and corre	ect to the best of my knowle	edge and belief.

(

Applicant

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