Scholarship Application Form				
By NUIC				
*********	***********			
Student Information				
Name-Surname				
Student ID No	Major			
GPA(Transcript attached) Tel. No				
Have you received any scholarship?				
Yes (Please specify the academic year that you receive scholarship)				
Type of Scholarship \square Continuously \square Discontinuously				
□ No				
Family Information				
(Father's Name)	Age			
Address				
Occupation	Salary/month	Baht		
(Mother's Name)	Age			
Address				
Occupation	Salary/month	.Baht		
Parents' Marital Status				
☐ Married	☐ Separated ☐ Divorced.			
☐ Father passed away	☐ Mother passed away ☐ Parents passed away			
Amount of siblings (Including the student)				
Working/Married	(Persons) Studying(Persons)			
Not yet study (Persons)				
Guardian Information (In ca	se of parents passed away)			
(Guardian's Name)	Age			
Address				
Occupation	Salary/month	Baht		
Tel. No	Relations with student			
Amount of people that the guardian has to take care				

I acknowledge and agree to the following terms and conditions. Hereby, I certify that the information in this application is entirely true. If it has been proved to be false, I will renounce the right to receive this scholarship.

	Signature	Applicant
	()
	Date of application	
I, (name-surname)		am a father/mother/guardian
of	who applied for t	he scholarship in academic year
would like to certify	that the information in this ap	plication is entirely true. If it has
been founded to be false,		will be unqualified for applying
the scholarship immediately.		
	Signature	
	()
	Student's father/r	mother/guardian
	Date//	/
Recommendation of the appl	icant's eligibility and behavi	or from adviser. (NUIC)
	- ,	
	Cignatura	
	Signature	
	Adv)
	Adv Date/	
	Dale//	//