

**KASETSART UNIVERSITY**  
**APPLICATION FOR ADMISSION**  
**THAILAND SCHOLARSHIPS 2026**

Photo 1.5"

Not older than  
6 months

**PART 1: PERSONAL INFORMATION**

<b>NAME</b>	Mr / Ms / Mrs. .... <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> <div style="display: flex; align-items: center; margin-top: 10px;">         Date of Birth:(dd/mm/yyyy)         <div style="border: 1px solid black; width: 100px; height: 20px; display: flex; align-items: center; justify-content: center; margin-left: 5px;"> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="width: 10px; height: 20px; display: flex; align-items: center; justify-content: center;">/</div> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="width: 10px; height: 20px; display: flex; align-items: center; justify-content: center;">/</div> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-right: 1px solid black; width: 20px; height: 20px;"></div> <div style="width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;"></div> </div> </div> Passport No: ..... Date of issue: ..... Expiry Date (dd/mm/yyyy): ..... Nationality: ..... Blood Group: .....
<b>Applying for</b>	<div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <input type="checkbox"/> Master's Degree           <input type="checkbox"/> Doctoral Degree         </div> Academic Year: ..... Program Name: ..... Faculty: ..... Campus: .....

**PART 2: CONTACT DETAILS**

<b>CONTACT ADDRESS</b>	Postal Address: ..... City: ..... Postcode: ..... Country: ..... Tel: ..... Fax: ..... E-mail: .....
<b>CONTACT PERSON (For emergency)</b>	Mr / Mrs / Ms. .... <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <span>First</span> <span>Middle</span> <span>Last</span> </div> Postal Address: ..... City: ..... Postcode: ..... Country: ..... Tel: ..... E-mail: ..... Relationship with the Applicant: .....

**PART 3: EDUCATIONAL BACKGROUND**

Please describe your educational background beginning with high school.

Degree Level	University/Institution & Country	Graduation Date (dd/mm/yyyy)	Grade Point Average	Major/Subject
High School/Diploma				
Bachelor Degree				
Master's Degree				

#### PART 4: WORKING EXPERIENCE

Name and Address of Organization	Period of Employment	Position
Name  Location	From  To	
Name  Location	From  To	
Name  Location	From  To	

#### PART 5: RELEVANT INFORMATION (Evidence required)

##### CERTIFICATE OF ENGLISH LANGUAGE PROFICIENCY

☐ IELTS ☐ TOEFL ☐ TOEIC ☐ Other, (please specify): ..... Score: .....

Examination date: ..... / ..... / ..... (dd/mm/yyyy) Expiry Date: ..... / ..... / .....

##### HEALTH INSURANCE

This is to confirm that ☐ I have already had health insurance covering the period of my study program.

☐ I will apply for group insurance through Kasetsart University International College (KUIC) on my arrival.  
(The cost is around 250 USD/year.)

☐ Other, (please specify).....

##### ACCOMMODATION

I will apply ☐ Kasetsart University International Student Dormitory

☐ Self-arranged Accommodation

☐ Other, (please specify).....

##### APPLICATION DOCUMENTS

☐ *A certified copy of degree certificate*

☐ *A certified copy of transcript of records of your previous degree(s)*

☐ *2 letters of recommendation written by faculty members of the home university*

☐ *Birth certificate or national identification card or certified copy of passport showing date of birth with English translation*

☐ *Statement of purpose*

☐ *Research proposal or concept paper*

☐ *Valid English proficiency test results that indicated in the details of study programme*

☐ *Permission letter for scholarship application for those who are official governments*

☐ *Others.....*

**DECLARATION** I hereby certify that I have the qualifications for application as specified in the admission announcement of Kasetsart University. If any of my qualifications are incomplete or if I have given false information in this application form, I hereby willingly permit Kasetsart University to disqualify my application without any appeals.

Applicant's signature ..... Date (dd/mm/yyyy) .....