

Outbound Student Exchange Program Application Form

please attach four recent colored passport size photo (with facing forward and without any head covering)

		Academic Year		
Preferred School/Country	1			
	2			
	3			
	4			
	5			
	*Please	fill out this form in CAPITA	AL letters	
Student Information				
Applicant's Name		Family Name	Middle Name	Given Name(s)
	English Name			
	Thai Name			
Date of Birth				
Age				
Sex	□Bachelor Pro	gram □Master Program		
Nationality				
Current address				
Zip Code				
Phone Mobile phone				
E-mail				

Home Institution						
Name						
				DD.MM.YYYY		
Date of entry to home institution						
Current studies						
Study Programme	□Bachelor Pr	ogram	□Master Program	□Student IE	D	
Department						
Major/Field of study						
Address						
International coordinator	Name: NARTPRAWEEN SUPPASRI					
monatoral coolamate.	Phone: 02-800-2525 Ext.3202 Fax: E-mail: irmusicmu@gmail.com					
Professor(s) in main field of study						
Language Skills						
Mother tongue						
Engish skills	□Daily conve		□Limited	□None		
Others:	□Daily conversation □Limited □None □Only major field					
Details of Exchange Program						
Desired study period at host institution	_		DD.MM.YYYY		DD.MM.YYYY	
besiled study period at host institution	From			to		
Degree Program	□Bachelor Pr	ogram	□Master Program	·		
Major/ Field of study						

Desired courses at h	nost institution - for the	courses to be o	offered during the e	xchange program (if avai	ilable)	
	College of Music Mahidol University				Host Insttitution	
	Code & Title		Credit(s)	Co	de & Title	ECTS/Credit(s)
Housing Preference		□Find my owi	n □On-o	campus Accommodation	☐Off-campus Accommodation	า
Proof of Major Fie	eld					
Please submit proof o	f major field skills					
→Yes	□Recording (CD/DVD) □Other materials ()					
→No	□Nothing needed because					
Please fill in the reper	toire that has been recor	ded				

Emergency Contact (Please provide a	a contact perso	n who can comr	nunicate in I	English)				
		Family Na	ame	Middle	Name	Given Name(s)		
	English Name							
	Name in your own language							
Sex	□Male		□Fema	ıle				
Address	Femal							
Relationship with the applicant	□Parents	□Guardiar		Spouse				
Phone Mobile phone								
E-mail								
Signature of Applicant and Advisor	ı							
Student Signature				Date				
Advisor Signature				Date				
For Office Use Only								
Application received by								
Date								
Check Sheet								
A completed College of Music Exchange Student Application Form								
A passport photo size								
A copy of passport with "Certified True Copy" and your signature								
A statement of purpose essay (Maximum one page describing your background, interest in the university you chose, and your expectation of participation benefits)								
Performances: no more than 30 mins (CD/VCD/DVD/YouTube Links) (for composers): should also include scores of 3-4 representive works in PDF format								
An official academic transcript in English								
A letter of recommendation signed by academic advisor								
A copy of TOELF/IELTS score *if applicable								