



Outbound Student Exchange Program Application Form

Academic Year _____

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

Preferred School/Country

1. _____
2. _____
3. _____
4. _____
5. _____

*Please fill out this form in **CAPITAL** letters

Student Information

Applicant's Name		Family Name	Middle Name	Given Name(s)
	English Name			
	Thai Name			
Date of Birth				
Age				
Sex	<input type="checkbox"/> Bachelor Program <input type="checkbox"/> Master Program			
Nationality				
Current address				
Zip Code				
Phone Mobile phone				
E-mail				

Home Institution	
Name	
Date of entry to home institution	DD.MM.YYYY
Current studies	
Study Programme	<input type="checkbox"/> Bachelor Program <input type="checkbox"/> Master Program <input type="checkbox"/> Student ID _____ <input type="checkbox"/> Year _____
Department	
Major/Field of study	
Address	
International coordinator	Name: NARTPRAWEEEN SUPPASRI Phone: 02-800-2525 Ext.3202 Fax: E-mail: irmusicmu@gmail.com
Professor(s) in main field of study	

Language Skills	
Mother tongue	
English skills	<input type="checkbox"/> Daily conversation <input type="checkbox"/> Limited <input type="checkbox"/> None <input type="checkbox"/> Only major field
Others:.....	<input type="checkbox"/> Daily conversation <input type="checkbox"/> Limited <input type="checkbox"/> None <input type="checkbox"/> Only major field

Details of Exchange Program				
Desired study period at host institution	From	DD.MM.YYYY	to	DD.MM.YYYY
Degree Program	<input type="checkbox"/> Bachelor Program <input type="checkbox"/> Master Program			
Major/ Field of study				

Emergency Contact (Please provide a contact person who can communicate in English)				
		Family Name	Middle Name	Given Name(s)
	English Name			
	Name in your own language			
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female			
Address	Femal			
Relationship with the applicant	<input type="checkbox"/> Parents <input type="checkbox"/> Guardian <input type="checkbox"/> Spouse			
Phone Mobile phone				
E-mail				

Signature of Applicant and Advisor			
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	<input type="checkbox"/>
A passport photo size	<input type="checkbox"/>
A copy of passport with "Certified True Copy" and your signature	<input type="checkbox"/>
A statement of purpose essay (Maximum one page describing your background, interest in the university you chose, and your expectation of participation benefits)	<input type="checkbox"/>
Performances: no more than 30 mins (CD/VCD/DVD/YouTube Links) (for composers): should also include scores of 3-4 representative works in PDF format	<input type="checkbox"/>
An official academic transcript in English	<input type="checkbox"/>
A letter of recommendation signed by academic advisor	<input type="checkbox"/>
A copy of TOELF/IELTS score *if applicable	<input type="checkbox"/>