

North-Chiang Mai University International College Student Application form





			Date
Nationality:	Religion:		
First name:	Middle	e name:	
Last name:			
Passport Number:		_Date of birth:	
Gender:	Telephone Number	·	
E-mail:			
Address in Thailand.			
Emergency Contact N	Number:		
Previous Education			
Name of School:			(Country)
Course Studied:			
Degree Earned /G.P.A	\	Year	Graduated:
Language of Instructi	on:		
Program Registration	n		
Degree: ☐ Bachelor	□Master □Doctorate		
Faculty: ☐ Social Sc	iences and Liberal Arts	☐ Business Administration	□Engineering and
Technology □Laws	□International College		
Major:			
□ 4 year □4Ye	ar (Weekend) □Special Project	: □B.B.A+MBA	
How did you Know a	bout the University? :		
I confirm that	the information given in this	form is true , complete and a	accurate
	Signature	Applicant	
	()	
	Date//		
		Signature	Recipient
		()
		Date//	