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**MAHIDOL UNIVERSITY**  
**FACULTY OF SCIENCE**

**APPLICATION FOR ADMISSION TO INTERNATIONAL BACHELOR PROGRAM IN**

**BIOMEDICAL SCIENCE**

Please complete this form in BLOCK CAPITALS

**1. PERSONAL DETAILS**

Surname/ Family name \_\_\_\_\_ First/ Given names \_\_\_\_\_  
Title \_\_\_Miss/\_\_\_Mr. Date of birth \_\_\_\_\_ Gender \_\_\_F/ \_\_\_M  
Day-Month-Year  
Nationality \_\_\_\_\_ Country of birth \_\_\_\_\_  
Country of permanent residence \_\_\_\_\_  
Passport number (for non-Thai) \_\_\_\_\_ Expiry date \_\_\_\_\_  
Day-Month-Year

**2. APPLICANT CONTACT INFORMATION**

Permanent of home address \_\_\_\_\_  
\_\_\_\_\_ Country \_\_\_\_\_ Postcode \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**3. ADDRESS FOR CORRESPONDENCE (if different from home address)**

Address \_\_\_\_\_  
\_\_\_\_\_ Country \_\_\_\_\_ Postcode \_\_\_\_\_

#### 4. EDUCATIONAL BACKGROUND

Certificate granted	Program study	School	Country	Year enrolled from...to...	GPA or %

#### 5. ENGLISH LANGUAGE PROFICIENCY

Is English your first language?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Please list any formal English language qualifications with results obtained

English qualification	Grade or score	Date test taken or to be taken (Day-Month-Year)
IELTS		
TOEFL		
SAT I (Only English)		

#### 6. FINANCE SUPPORT

Please provide details of how you intend to pay your tuition fees.

\_\_\_\_\_ Self

\_\_\_\_\_ Family (please specify) a) Contact person \_\_\_\_\_

b) Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Sponsor (please specify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Scholarship (Please specify) a) Scholarship name \_\_\_\_\_

b) Duration of scholarship \_\_\_\_\_

## 8. SCHOLARSHIPS

The Faculty of Science (International Bachelor Program), Mahidol University offers two categories of scholarships each year to outstanding students based on high school academic performance, talent academic achievement and long-term academic performance.

If you are interested in applying for one of SIM Scholarships, please specify and fill out the form.

\_\_\_ NO

\_\_\_ SIM Initiate Scholarship

\_\_\_ SIM Premier Scholarship

## 7. DECLARATION

I certify that the information given in this application and in the supporting documents is accurate and complete. I agree to the University processing personal data contained in this form, or other data which the University may obtain from me or other sources, for any purpose connected with my studies, health, welfare, safety or for any other legitimate purpose. I acknowledge that the provision of incorrect information or documentation relating to my application may result in cancellation of any offer of enrollment by Mahidol University

Applicant's signature \_\_\_\_\_

( \_\_\_\_\_ )

Date \_\_\_\_\_

Day-Month-Year

Please submit this application form to

Office of International Program Development

Medical and Graduate Education Division

Faculty of Science, Mahidol University, Rama 6 Road, Bangkok 10400 Thailand

Phone: + 66 2 2015827 E-mail: scsim@mahidol.ac.th



## SIM SCHOLARSHIP APPLICATION FORM

1. Major  Biomedical Science  Bioresources & Environmental Biology  
 Materials Science & Nano Engineering  Industrial Mathematics

2. Applicant's name \_\_\_\_\_

3. Scholarship type  SIM Initiate Scholarship  SIM Premier Scholarship

4. Please complete your English language qualifications with results obtained

English qualification	Grade or score	Date test taken or to be taken (Day-Month-Year)
IELTS		
TOEFL		
SAT I (Only English)		

5. Educational information

GPA	School	Major

6. High school Distinctions/ Awards

Distinctions/ Awards	Year received

Scholarship applicant must be admitted into the International Bachelor Programs at Faculty of Science, Mahidol University of their choice first as regular students before scholarship decisions are made. Please submit your completed Scholarship Application form along with your application.

Applicant's signature \_\_\_\_\_

( \_\_\_\_\_ )

Date \_\_\_\_\_

Day-Month-Year