

Thammasat International Exchange Application: Academic Year 2025

First Name	Family Name
Chaola list of a	
	equired documents
	Thammasat International Exchange Application Form
	Course equivalent form
	Proposed Study Plan
	Parental consent and financial support form
	Current transcript
	Language Proficiency test score
	Two 2X2 inch photos (within the previous 6 months; white or blue background; no hat/sunglasses)
	Copy of applicant's Identification Card
	Copy of applicant's Household Registration
	Copy of Parent's Identification Card/ Household Registration. If others, please specify
FOR OFFIC	CE USE ONLY:
	□ Page □ Not page
OIA - CC	☐ Pass ☐ Not pass
OIA office rev	<u>tew:</u>
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0	Application and required documents complete
O	Application and required documents not complete
	Missing or incomplete documents include:
	1.
	2
\cap	
0	GPA \square Pass \square Not pass
O	Language Proficiency test score Pass Not pass
	Signature
	()
	Position
	Date Month Year



Photo

Thammasat International Exchange Program Application Form 2025

With reference to the announcement for the Than	mmasat International Exc	change Program, made by the Office of
International Affairs, to offer an international education opportun	ity to Thammasat students	s to study as a non-degree seeking exchange
student at an overseas partner university for the duration of a ma	ximum of one academic y	vear,
I (Mr. /Mrs./Ms.)		hereby declare my intention to
apply for this exchange program by completely filling in t	his application form an	d permitting the Office of International
Affairs to check its accuracy and correctness.		
Part 1 Applicant's personal information)		
1.1 First Name and Family Name Mr. /Mrs./Ms		
Date of birth / / AgeYrs	Ethnicity	Nationality
School/Faculty Program	☐ Thai Program	☐ English/International Program
Course/Program Name		
Level of Education Bachelor's degree	Master's degree \square O	ther (please specify)
Current year of study Student ID	Cum	ulative GPA
*** Law Students are required to submit academi	c scores with its GPA	conversion equivalent
Major	Minor	
Current Accumulated credits Number of	of required credits for g	raduation
Credits expected to complete at TU after the exchange	period	
Expected year of graduation (exchange period also cour	nted)	
1.2 Current address Moo Road	Sub-District	
DistrictProvince	Postal code	
Home phone	Mobile phone	
E-mail Address		
Father's name-surname		
Occupation		
Mother's name-surname		
Occupation		

1.3 Please name your financial spo		-	-	
Financial sponsor's First Nan	•			
Relation to you				
Occupation_		Mobile Phon	e	
1.4 Language Proficiency Level				
☐ English [O TOEFL/ C	DIELTS / O TOEIC	(Total Score:]	
(Writing	Reading	Listening	Speaking)
☐ Japanese (Level)	(Scores)			
(Writing	Reading	Listening	Speaking)
French (Level)	(Scores)			
(Writing	Reading	Listening	Speaking)
Chinese (Level)	(Scores))		
(Writing	Reading	Listening	Speaking)
☐ Korean (Level)	(Scores)			
(Writing_	Reading	Listening	Speaking)
Other language	(L	.evel)	(Scores)	
(Writing	Reading	Listening	Speaking)
Questions no 1.5 – 1.8: Additional	documents, certificates	s, etc. can be attached, if	needed.	
1.5 Special Abilities				
☐ Musical Skill	☐ Dance	☐ Singing	☐ Sports	
☐ Arts	☐ Martial Arts			
Others: please specify	<i>'</i>			
1.6 Any creative works/ awards/ so	cholarships			
1.6.1				
1.6.2				
1.7 Study Abroad Experience				
Scholarship/Program Name				
Country	Period			
1.8 Social/ Student activities				
1.8.1				
1.8.2				

1.9 I agree to abide by the condition that I am not and will not be engaged in any other exchange programs managed
by the Office of International Affairs or my faculty until this application is finalized.
1.10 \square I agree that while on the exchange program, I will fully dedicate myself to study and will not be involved with
any activities which will distract me from study.
1.11 \square I agree that, if selected for the exchange program, I will be obliged to pay the fees and expenses in accordance
with the university announcement on exchange program fees B.E. 2558 and other expenses as stipulated in the exchange
agreement.
1.12 \square I confirm that I have sufficiently researched the information related to the academics, life overseas and conditions
of being an exchange and international student determined by the partner university to which I am applying. I have also
consulted with my academic advisors, my faculty and my parents about my intention to participate in this exchange program,
and they have granted me permission to continue my application. Upon my return, I will undertake the credit transfer process
and continue my studies at Thammasat University until my graduation.
1.13 \square I will strictly follow and keep myself updated about information, regulations, announcements or any measures
governed by Thammasat University, my host university and my host country regarding a contagious or infectious epidemic
disease.
1.14 \square I confirm that the above-mentioned statements are true. If I am selected to be a Thammasat exchange student,
I willingly agree to follow all related announcement and policies. If found later that the given information in this application
is untrue, either partially or entirely, I acknowledge that the university has the unconditional right to reject my eligibility to
apply and will accept all penalties governed by Thammasat University.
Signature
()
Date Month Year

Part 2	Detailed application		
2.1 I	(Mr. /Mrs./Ms.)		wish to apply
for the	Thammasat International Exchange Program by ranking my	10 preferred partner un	iversities as follows:
No.	Name of preferred partner universities. If some of your	Country	Intended course/program
	choices are in ISEP, please put "ISEP" in front of the		
	selected university's names		
1			
2			
3			
4			
5			
2.2 In	ndicate the duration of your exchange period		
[1 Semester: starting from	End:	
[1 Academic year: Starting from:	End:	
2.3	agree and accept that an acceptance to a preferred university	ty of my choice will be	subject to the decision made by
a partn	er university which is beyond the authorization of the Office	of International Affairs	, Thammasat University.
I	☐ Yes		
į	□ No		

Part 3: Statement about yourself

Please write a brief statement in English (300 – 500 words) or on a separate paper, to describe your background, proposed study plan, intended courses, as well as your future plan after completing your exchange study. As a prospective exchange student, you should address how you will represent Thammasat University while studying abroad. You may also describe how your study abroad experience will contribute to your career path and society.

Part 4: Credit Transfer and Course Equivalency

Please specify the course that you wish to enroll in at the partner university in the semester you choose to apply for, according to item 2.1 Partner University name______Country____ Semester/Year From To Courses offered at your preferred University Courses offered at Thammasat University Course code Course title Course code Course title Semester/Year From To Courses offered at your preferred University Courses offered at Thammasat University Course code Course title Course code Course title Please give further information, if your preferred university offers a 3rd semester Semester/Year From To Courses offered at your preferred University Courses offered at Thammasat University Course code Course title Course code Course title

Note:

- 1. If you intend to enroll for more courses at your preferred university and the table above cannot fit all of them, you can attach additional pages.
- 2. If you choose to apply for more than 1 preferred university, you can make as many copies of the form as the number of your preferred universities. Complete and attach additional forms to this application.

Partner University name	Country		
Semester/Year	From		То

Courses offered at your preferred University		Courses offered at Thammasat University		
Course code	Course title	Course code	Course title	

Part 5: Apply for the exchange scholarship

with the university announcement on the exchange program fees B.E. 2558 and other expenses as stipulated in the exchange agreement. I wish to apply for an exchange scholarship I do not wish to apply for an exchange scholarship. However, I confirm to continue my exchange application even though I am not awarded an exchange scholarship. Information for scholarship consideration Have you ever been awarded any scholarship? O No O Yes (please attach any proof of scholarships you have ever received) and provide the details: Name of Scholarship Period of Scholarship Types of Allowances: Tuition fee waiver and monthly allowance Amount of Scholarship Tuition fee waiver, no monthly allowance Amount of Scholarship Monthly allowance only Amount of Scholarship Others (Please specify)

I acknowledge that if selected for an exchange program, I will be obliged to pay the fees and expenses in accordance

I have no intention to apply for an exchange scholarship.

Part 6: My Health Declaration Do you have any chronic illness? Yes. Please provide information \square No Do you have any health condition that may disrupt your exchange study? Yes. Please provide information_ \square No Do you have any family issues that may impact your exchange study? Yes. Please provide information_____ □ No Personal Medical History ☐ When was the last time you have felt really sick? Please indicate the disease or illness symptoms. Period of treatment When was the last time you were admitted to hospital and received medical treatment? Please indicate the disease or illness symptoms. Period of treatment ☐ I have never been admitted to hospital. Do you have any mental health condition that requires a mental health professional? Yes. Please provide information \square No While on exchange, will you be required to take any prescribed medicines? Yes. Please provide information □ No Assessment by the Faculty's responsible officer ☐ The applicant is not in the process of applying for any exchange program at the faculty level. The applicant is given permission by the faculty to apply for the Thammasat International Exchange Program managed by the Office of International Affairs, Thammasat University. The information given in this application has been checked by the faculty and found to be true and correct. The applicant's proposed study plan and course equivalency indicated in the table have been approved. (Signature) (_____) Position Date Month Year Tel.

E-mail_

Parental Consent and Financial Support Form

	I (Mr./Mrs./Ms.)
Addre	essSoiStreet
Sub-d	listrictDistrict
Provi	ncePostal code
Home	phone:Mobile phone:
Occup	pationPosition
Organ	nization Office phone no:
Relati	on to the applicant: of (Mr./Mrs./Ms,)
Have	supported the applicant since
I agre	e and permit (Mr./Mrs./Ms.) to apply for the Thammasa
Intern	national Exchange Program. I hereby confirm that I am fully prepared to financially support (Mr./Mrs./Ms.
	to study as a Thammasat exchange student at
(name	e of the country)
I here	eby guarantee that:
1.	The applicant is physically, emotionally and mentally fit to study abroad.
2.	I agree with the proposed study plan of the applicant at the intended partner university.
3.	I accept the condition that acceptance to a partner university as an exchange student will be subject to its decision
4.	The applicant has provided me with all the details about all the fees and expenses incurred throughout this
	exchange program and I am in a full financial position to entirely sponsor the applicant until completion of
	the exchange program.
5.	I accept the condition that the applicant as an exchange student will have to respect and follow all regulation
	and rules governed by Thammasat University and the partner university. If later found that the applicant breaches
	or disobey such rules, I agree to have the applicant's eligibility to apply for this exchange program rejected and
	agree to have Thammasat University and the partner university impose penalties at their discretion.
6.	If, after selection, the applicant is unable to participate in this exchange program within the indicated exchange
	period, I agree that Thammasat University shall reserve the right not to refund the fees related to this exchange
	program and am willing to be fully responsible for any cost incurred during the participation period.
7.	If found later that the information given in this application is false or untrue, I agree that Thammasat University
	shall reserve the right to reject eligibility to apply for other exchange programs by the applicant with ne
	conditions.
	Signature
	()
	Date Month Year

Note: (1) Attach a copy of parents' ID card (2) If the person completing this form is not the applicant's parent, please attach evidence proving the relationship to the applicant and ongoing sponsorship.

Academic Advisor Support Form

I,		
Faculty	Tel	
E-mail		
am an academic advisor for (Mr./Mr	s./Ms.)	
in the Faculty of	and am aware of his/ her application submitt	ed for the
Thammasat International Exchange	Program. As the advisor of the student, I consider this student qualified a	and support
Mr./Mrs./Ms.	to apply for this exchange program. I approve th	e student's
proposed study plan and acknowledg	ge that the credits earned at the partner university will be taken into consider	deration for
the course equivalency process after	the applicant returns to study at Thammasat University.	
Other comments (if any)		
	Signature	
	()
	Position	
	Date Month	Year