

Thailand International Cooperation Agency (TICA) Ministry of Foreign Affairs APPLICATION FORM for Thailand International Postgraduate Programme: TIPP

	Reference N Received:	CIAL USE ONLY
INSTRUCTIONS This application form is composed of five parts. Part A to part E should be completed <u>in triplicate</u> , part A to part D should be completed by the candidat part E by the government authority. <u>All application forms must be filled in typewritten form.</u> Each question must be answered clearly and complete Detailed answers are required in order to make the most appropriate arrangements. The National Focal Point for International Development Cooperation of the nominating Government will forward one original and tw copies of certified application form and other related documents to the Thail International Cooperation Agency (TICA), the Government Complex, Buildi (South Zone), 8 th Floor, Chaengwatta Road, Laksi District, Bangkok 10210, THA through the Royal Thai Embassy/Permanent Mission of Thailand to the United N Royal Thai Consulate – General accredited to eligible countries/territories. The candidate is required to attach medical report or health status certification No consideration will be given to the late submissions or incomplete applications/documents	ely. and ing B ILAND, ations/	(Please attach photograph here)
Course Name:		
Institute:		

A. PERSONAL HISTORY

Title	Family			dle name Given name				Gender		
	(as shown in passport and kindly attach th			<u> </u>	-	sport, in	formatio	n will be used		
			for travel a	rrangem	lent)	1				
o Mr.									o Male	
o Mrs.									o Female	
o Ms.										
0				1			1			
City and c	country of birth	Nationa	lity		ate of bi		Age	Marital	Religion	
				(DI	D/MM/Y	(Y)		Status		
Work address (Please complete this section as clear as					Home address (Please complete this section as clear as					
possible, info	rmation will be use	d for travel arrar	gements.)	possib	le, infori	mation v	vill be us	sed for travel arr	angements.)	
	••••••									
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				<u></u>						
	intry Code / Area	Telephone No	:	Telephone No : E-mail :						
Code/ Numbe	er)	•••••	•••••							
				Intern	ational	Airport	/City fo	r departure :		
•••••										
Name and ad	dress of person to b	e notified in case	e of emerge	ncy :						
	••••••							•••••		
Telephone No	0 :		R	elationsk	np of the	is persor	n to you		1 of 1 magaz	

Languages:			READ			,	WRITE			SPEAK	
		Excell ent	Good	Fair		Excell ent	Good	Fair	Excell ent	Good	Fair
Mother tongue:											
English											
Others:											
English Proficiency Test	(please atta	ch)	🗆 TO	EFL	Sco	ore	[IELT	's S	Score	
(only a candidate for a deg	gree course)			her (sp	ecify))					
Education Record:											
Education Institution	City / C	Country	Yea	rs Atte	nded		Degrees			Special fie	
			Fron	1	То		and Certificates		es	study	
Have you ever been traine	d/studied in	Thailand	? If yes, w	hat cou	urse, v	where a	and for how	w long?			
□ No											
I Yes, please specify											
Please give a list of relevant publications/researches (do not attach details)											
							• • • • • • • • • • • • • •	• • • • • • • • • • •			

B. EMPLOYMENT RECORD (It is important to give complete information. For each post you have occupied, give details of your duties and responsibilities.)

Present or most recent post :	Description of your work,
Dates from to	including your personal responsibilities
Title of your post:	
Name of organisation:	
Ministry	
Type of organisation:	
Official address:	
Previous post :	Description of your work,
Previous post : Dates from to	Description of your work, including your personal responsibilities
Dates from to Title of your post:	
Dates from to	
Dates fromto Title of your post: Name of organisation:	
Dates from to Title of your post: Name of organisation: Ministry	
Dates fromto Title of your post: Name of organisation:	
Dates from to Title of your post: Name of organisation: Ministry Type of organisation:	
Dates from to Title of your post: Name of organisation: Ministry	
Dates from to Title of your post: Name of organisation: Ministry Type of organisation:	
Dates from to Title of your post: Name of organisation: Ministry Type of organisation:	

C. REFERENCES (Please attach the recommendation letters from three (3) persons acquainted with your academic and professional experiences.)

D. EXPECTATIONS

Please describe the practical use you will make of this training/study on your return home in relation to the responsibilities you expect to assume and the conditions existing in your country in the field of your training. (Give the attached paper, if necessary)

I certify that my statements in answer to the foregoing questions are true, complete and correct.

If accepted for a scholarship award, I undertake to:

- a) carry out such instructions and abide by such conditions as stipulated by both the nominating government and the host government in respect of this programme of scholarship;
- b) follow the programme of scholarship, and abide by the rules of the University and Thailand International Cooperation Agency in which I undertake the scholarship;
- c) refrain from engaging in political activities, or any form of employment for profit or gain;
- d) study full time, make academic progress and submit progress reports to Thailand International Cooperation Agency;
- e) not bring any member of my family to stay with me during the course;
- f) return to my home country promptly upon the completion of my programme of scholarship.

I also fully understand that if I am granted a scholarship award and violate Thailand International Cooperation Agency's rules and regulations, I may be required to return part or all of the scholarship paid, depending on the severity of the violation, without any appeal.

:	Signature of candidate:
]	Printed name:
	Date:

E. GOVERNMENT AUTHORISATION (To be completed by the National Focal Point for International Development Cooperation in charge of nomination of the candidate (see guideline for TIPP for detailed information on nomination.))

Supervisor's Endorsement:
 I certify that, to the best of my knowledge, (a) all information supplied by the candidate is complete and correct; (b) the candidate has adequate knowledge and experience in related fields and has adequate English proficiency for the purpose of the scholarship in Thailand.
On return from the scholarship, the candidate will be employed in the following position:
Title of post
Duties and responsibilities
Signature of responsible supervisor
(Official stamp)
Title:
Organisation:
Official address:
E-mail:
Date:
National Focal Point for International Development Cooperation Endorsement:
(To be completed by the National Focal Point for International Development Cooperation, please affix seal here or attach a Diplomatic Note)
(Official stamp)

Attachment

		MEDICAL	REPORT
Name of Candidate			Age: Gender:
Country			C C
Physical Examination	(To be filled in	by physician)	
Height Cm	s. Weight	kgs. Blood	Pressure/min.
Vision Right	Left	Eyes	With glasses / Without glasses
Check each item in ap	propriate colum	n	
Items	Normal	Abnormal	Additional Comments
General	0	0	
Skin, Scalp	0	0	
Lymph nodes	0	0	
Eyes	0	0	
Ears	0	0	
Orthoscopic Exam			
Nose	0	0	
Pharynx & tonsils	0	0	
Teeth	0	0	
Thyroid gland	0	0	
Lungs	0	0	
Heart	0	0	
Abdomen	0	0	
Liver	0	0	
Spleen	0	0	
Hernia	0	0	
External genitalia	0	0	
Rectal exam	0	0	
Vertebrae	0	0	
Locomotor	0	0	
Reflejes	0	0	
Mental health status	0	0	

LABORATOR	XY EXAMINATIONS
Blood group	
WBC	Cells/cu.mm.
Differential	PMN% Lymp% Mono% Eos%
	Baso% Band%
	: Colour Sp. Gr pH
Sugar	
	Alb Blood Ketones Blie
	Micro : WBC/HPF., RBC/HPF., Epethelial/HPF.
	Casts/ HPD., Others
Stool examinati	ion for parasite & Ova
Chest X – Ray 1	report
	y test
erne program.	
Is the person ex	amined at present in good health and able to work full time?
Is the candidate	e able physically and mentally to carry on intensive study away from home?
Is the candidate	e free from infectious diseases (such as tuberculosis, leprosy, syphilis and filariasis) and other conditions
	osis and drug addiction) which could present risks for anyone during the scholarship period?
(For female can	ndidate) Is the person examined pregnant?
Doos the condition	dete house one detion on defect which might acquire tractment during the scholowship maried?
Does the candic	late have any condition or defect which might require treatment during the scholarship period?
I certify that th	ne candidate is medically fit to undertake the scholarship in Thailand.
י י ות	
Physician sign	nature (with stamp)
	Full name and address of Examining physician (printed)
Place and Date	e

Telephone:
(printed)
E-mail:

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