

## KMITL Doctoral Scholarship Short-term Research

(Photo)

Please complete the form below. It must be  $\underline{\text{typed}}$  in English ONLY

Section 1 : Application Form KMITL Doctoral Scholarship Short-term Research				
Title: Mr. Ms. Ms. Mrs.	Gender: 🗌 Male [	Female		
Name:		(First, Middle and Surname)		
Date of Birth:(DD/MM/YYYY)	Age:	Marital Status: 🗆 Single 🗀 Married		
Telephone number : E-mail:				
Identification Number:				
Date of issue: (DD/MM/YYYY) Expired date: (DD/MM/YYYY)				
Section 2 : Advisor's Information				
2.1 Advisor at KMITL				
Advisor's name :				
Division : Faculty :				
Mobile Phone number :	Mobile Phone number : E-mail :			
2.2 Mentor during Short-term Research				
Name :	ame : Academic Position :			
Division : Faculty :				
University/Institution:				
Mobile Phone number :	E-mail :			
Section 3 : Research Plan during Short-term Research				
3.1 Expected Short-term Research				
Total Period (X Month(s) and X Days) :				
Date of Arrival :	Date of Departure :			
University/Institution :				
City :	Country :			
3.2 Please describe briefly your research plan during Short-term Research				
Research topic :				

Section 4 : Document Checklist				
Please check (v) that your application is complete and that you have enclosed all documents listed below. These documents are compulsory and please note that you complete documents and duly authorized signatures. You may also attach other supporting document that can reinforce your application.				
also alla	acii o	ther supporting document that can re	enflorce your application.	
4.1		Application Form will only accept the application with signature of applicant and Advisor.		
4.2		Photocopy of your current passport		
4.3		Acceptance Letter, e-mail, or any evidence showing a consent from the academic of prospective research		
4.4		Other documents		
		-		
Section 5 : Declaration				
I certify that the statements made by me in this form are true and correct to the best of my knowledge.  If accepted for the Short-term Research, I agree:  (a) to follow the course, and abide by the rules of the institution or establishments with which I undertake to research  (b) to submit any progress report or evaluation questionnaires which may be prescribed.				
Applic	<u>ant</u>		Endorsement by Advisor	
Signatu	ıre:		Opinion:	
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Date:			Signature:	
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			Date:	