

Assumption College Lampang

Application Form

Photo 2 in

	Date:	
First Name:	Family Name:	
Nickname:	der:Marital Status:	
Nationality:	Religion:	
Birthday(Date/Month/Year):		Age:
Name of Spouse:	No. of Children:	
Home Address : House No:	Road:	
District:	City/Province/State:	
Country:		
Address in Thailand: House No:	Road:	
District:	City/Province:	
House Tel. No:	Mobile Phone:	
E-mail Address:		
Educational Background :		
1) High School Level		
Name of School	Address	Year Graduated
2) Undergraduate Level		
Name of University	Address	Year Graduated
Major:	Minor:	
3) Graduate Level		
Name of University	Address	Year Graduated

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4)	Oth	ner Attainment/Qualifications:		
•••				•••••
<u>Sp</u>	ecial	Talents/Skills:		
•••	• • • • • •			•••••
•••				
Sei	mina	ars/Training Attended:		
		Name of Seminar/Training	Place	Year
•••				
•••				
W	ork l	Experiences:		
		Work/Responsibility	Name of Company	Year
• • •				
		ents submitted with application form	(Please tick):	
()	Photocopy of passport		
()	2 copies of recent ID photo – 2", colore	ed or black and white	
()	Transcript of records		
()	Certificates/Diplomas or other credenti	ials	
		A	ll of the above information is true and correct.	
			Signature of Applicant	
			(Please sign above printed name)	