



Code Number											
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<b>Applicati</b>	ion F	orr	n								
Sripatum International College											
Sripatum University, 8th Floor - Building 11											
2410/2 Phaholyothin Road, Jatujak, Bangkok 10900 Thailand											
Tel: +66-2579-	1111 ex	t. 130	01, 130	08 Mok	oile: +6	66 064 (	073113	32 E-m	nail: intl@spu.ac.th		
APPLICAT	ION I	OAT.	A								
For Degree in	:										
	$\square$ B.A. in Airline Business										
	☐ B.Acc in Accountancy										
	☐ B.B.A. in International Business Management										
	☐ B.B.A. in International Hospitality Management										
	☐ B.B.A. in International Hospitality Management (SHML) 3+1										
	☐ Preparation course for Sripatum International College										
For Entry in	Year _				-	Appl	lying a	as [	☐ First year studen	t	
	□ Su	ımme	er (Ju	ne – J	uly)				☐ Transfer student		
	☐ Semester I (August – December)								☐ Semester II (January – May)		
English Pr		•	}					_			
TOEFL/IEL	TS/TO	EIC		] Tak	en				□ Will take		
						Date				Date	

## Name (English) First Middle Last Gender □ Male ☐ Female Date of Birth \_\_\_\_\_ Date Month Year Mailing Address \_\_\_\_\_ Street address City Postal Code Country Telephone Number Fax Area Code Number Area Code Number Official Identification Number/Passport Number **FAMILY INFORMATION** Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_ First First Last Last Position \_\_\_\_\_\_ Position \_\_\_\_\_ Company \_\_\_\_\_ Company \_\_\_\_ \_\_\_\_\_ Address \_\_\_\_\_ Street address Street address City Country Postal Code City Country Postal Code \_\_\_\_\_\_Telephone \_\_\_\_\_ Telephone \_\_\_\_\_ Area Code Area Code Number Number Fax \_\_\_\_\_Fax \_\_\_\_ Area Code Number Number ACADEMIC BACKGROUND Dates of Attendance Grade Level Institution Diploma/Certificate Location to to to

**GENERAL INFORMATION** 

to

Sripatum International College does not find it possible to admit all applicants who meet its requirements. The College, therefore, reserves the right to refuse admission to any applicants. The College also reserves the right to require the withdrawal of any student whose condition endangers or her own health or the health of other students or precludes him or her from doing the required work.

I certify that all statements made in this application for admission to Sripatum International College are correct, and I realize that all documents submitted to support of this application become the property of the College. I authorize the College to release information from this application and supporting documents to organizations sponsoring scholarships at the College to permit my being considered for scholarship support. I understand that I will be notified of any organization to which information is given.

Application's Signature	_ Date
If applicant is under 18 years of age, a guardian's or a pa	arent(s)'s signature(s) is required.
Father's Signature	_ Date
Mother's Signature	_ Date
Guardian's Signature	_ Date
INTERVIEWER COMMENTS	
Interviewer's Signature	Date