



ICO NIDA Office use only

Student ID:.....

ICO NIDA Scholarship:

Yes No

Other Scholarship:

Payment method:

Acceptance date:.....

Responsible officer ID:

Approval:

1.

2.

3.

Remarks

Important Information

- In order for this application to be effective the applicant must sign and include all documentation requested.
- Please return your completed application form and documentation to ICO NIDA Students Admissions Department or to one of the ICO NIDA's authorized representatives.
- Students Admissions Department, International College of NIDA (ICO NIDA) 118 Moo3, Serithai Road, Klong-Chan, Bangkok, Bangkok 10240 THAILAND.
- For more information please visit www.ico.nida.ac.th or email iconida_apply@nida.ac.th

1. Personal and Contact details

Title: Mr Ms Mrs Other

First name: Middle name:.....

Surname: Preferred Name:.....

Gender: Female Male

Date of Birth:/...../.....

Email Address:

Home Phone: Business: Mobile:

Mailing/Postal Address:

.....

.....

.....

Permanent/Home Address:

.....

.....

If your Permanent/Home Address is the same as your Mailing/Postal Address please write "As Above"

2. Preferred Program of Study

Please indicate one program preference, for program details please refer to ICO NIDA website at www.ico.nida.ac.th

Master of Management (MM)

- | | | |
|--|---|---|
| <input type="checkbox"/> International Business Management | <input type="checkbox"/> Marketing Management | <input type="checkbox"/> Financial Management |
| <input type="checkbox"/> Entrepreneurship Management | <input type="checkbox"/> Policy and Management | <input type="checkbox"/> Nonprofit Management |
| <input type="checkbox"/> E-Business Management | <input type="checkbox"/> Human Capital Management | |

Preferred classes Regular Program (Weekdays) Weekend Program

Preferred study plan Plan A (Thesis Plan) Plan B (Independent Study)

Preferred double/exchange program aboard Yes No

Doctor of Philosophy in Management (Ph.D. Management)

3. Residency Status

a) In what country were you born?

b) What country are you a citizen?

c) What is your nationality?

Please provide a certified true copy of your visa documentation including both the photo and current visa information pages.

4. Proficiency in English

a) Is English your first language? Yes No (If "yes" please go to the next section)

b) Were your undergraduate studies conducted in English? Yes No (If "yes", please provide a certified true copy of evidence)

c) Have you taken an English Language proficiency test in the last 2 years? Yes No

(If "yes", please provide name of the test Score.....and a certified true copy of evidence)

5. Previous Education (*most recent*)

<i>Year of Graduation</i>	<i>Name of Award/Program</i>	<i>Main Field of Study (majors)</i>	<i>Institution</i>

6. Employment Experience (*most recent*)

<i>Years Employed</i>	<i>Description of Position</i>	<i>Employer</i>	<i>Full or Part Time</i>

7. Other Qualification / Membership of Professional Bodies, Clubs or Foundations

8. Referees

<i>Name / Employer / Position</i>	<i>Contact Details</i>

9. Personal Statement

Please write a short paragraph (300-500 words) on why you wish to undertake the program and why should ICO NIDA choose you (Attach a separate page outlining your reasons)

OR

Send a short video (1-2 minutes) on why you wish to undertake the program and why should ICO NIDA choose you (You can attach YouTube link or CD outlining your reasons) (YouTube link:)

10. How did you find out about ICO NIDA?

Search engine ICO NIDA website Newsletter/Newspaper Brochure Poster Educational events Educational agent
 Employer Colleagues Friends NIDA's Students others (Please specify).....

11. Declaration

I declare that the information submitted is correct and complete. I authorize ICO NIDA to obtain information concerning my academic record from any school, university or other institution attended by me. I agree to inform ICO NIDA promptly should I be excluded, suspended or expelled from any tertiary institution during the period of my enrolment at the University. I consent to the collection, storage and disclosure of information concerning any acts of record falsification or other irregular acts in relation to my academic record. I acknowledge that ICO NIDA may vary or reverse any decision made on the basis of incorrect or incomplete information supplied by me.

Signature of Applicant:

Name in full: