

**Students Assistantship Scholarship Application Form**

**Faculty of Science, Mahidol University**

**Semester/Academic year: 1/2020**

**Students Assistantship Scholarship Type Type 1 Type 2**

**Photo**

**1. Name** (in Thai) …………………………..……….……..

 (in English) …………………………..……….……..

I.D. number ………………………...……...…….…..

 **Attended Degree** M.Sc. in ………….…………….…. Ph.D. in …………….………………..

 **Cumulative GPA**.................................

  **Field of study**…………………………….……..………..…. **Department** ……………………………………....

 **Telephone** (campus) …. ……………………………….. (Mobile) …………….….………….……………

 **E-mail address** ……………………………………………………….…………….……………………………..

**2. MU Labpass Test**

Not passed.

Passed Date taken:................................................

**3. Biosafety and Chemical Safety Training**

 Never Trained.

 Training in Biosafety Safety on................................................

 Training in Chemical Safetyon................................................

 I certify that the above information is true and correct.

 Name …………………………………………..

 (……………..…………………………..)

 **Student**

 Date ……………………………..

Name ………………………………………….. Name …………………………………………..

 (…………...…………………………..) (…………...…………………………..)

 **Major Advisor/Program Director Department Chairperson**

 Date …………………………….. Date ……………………………..

Medical and Graduate Education Division, Faculty of Science, Mahidol University.