

**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.