

Application Form - Teaching Assistant Scholarship Faculty of Science, Mahidol University

Semester/Academic year: 2/2022

Sch	<u>olarshi</u>	p Type	antship (Monthly)	
		☐ Students Assist	antship (Hourly)	
1.	Name-	Surname (Thai)		
		(English)		
		Student ID.		
		M.Sc. Ph.D. Field of study	Department	
Cumulative GPA.				
	Telephone (campus)		(Mobile)	
	E-mail	E-mail address		
2. Do you currently receive any academic scholarship of			ship or financial support?	
		No, I do not receive any academic schola	rship.	
		Yes, I receive the scholarship of		
		Amount (Baht)	until	
3. Do you currently receive monthly salary from your work? (Govern			our work? (Government / Private Organization)	
		No, I do not receive monthly salary.		
		Yes, I receive monthly salary.		
4.	4. MU Labpass Test			
		Not passed		
		Passed, Date taken:		
5. Biosafety and/or Chemical Safety Training				
		Never attend any training		
		Biosafety training on		
		Chemical safety training on		
			certify that the above statements are true and correct	
			Name	
			()	
			Student	
			Date	
N	lame		Name	
()			()	
Major Advisor/Program Director			Department Chairperson	
Date			Date	