|  |
| --- |
| 1. **Personal Information**
 |
| Name       | Family name       |
| 1 (1).pngDate of Birth(M/D/YYY)       | Age    |
| Nationality       | Passport Number       |
| Address       |
| Phone       | Facsimile       |
| Email       |  |
| Dietary Restrictions       |
| University/College       |
| Faculty       | Level of Study       |
|  Contact person in your home country (in case of emergency) |
| Name  -Select-       | Relationship       |
| Phone       | Facsimile       |
| Email       |
| 1. **Application for?**
 |
|  |
|  **(please select one research center you interested in)** |
|   |
|   |
|    |
|   |
|    |
|      |
| **Department**  -Select- **Preferred area**       |
|  |
| **Note::** We will contact you soon, to ask your confirmation and doing the formal registration.**Complete the application form then send to** [sci-summer@group.psu.ac.th](https://webmail.psu.ac.th/webmail/src/compose.php?send_to=sci-summer%40group.psu.ac.th) |

**Online Application**Faculty of Science ,Prince of Songkha University