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| 1. **Personal Information** | |
| Name | Family name |
| 1 (1).png  Date 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?** | |
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| **(please select one research center you interested in)** | |
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| **Department**  -Select-  **Preferred area** | |
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| **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