



Room No:/ Sequence.....

Key card No:

KASETSART UNIVERSITY
DORMITORY APPLICATION FORM

Academic year Kritsana International Dormitory

PHOTO

Taken within
the last 6 months
(3x4 cm.)

STUDENT OR RESIDENT INFORMATION

First Name		Last Name		Middle Name	Nickname
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		Religion			
Date of Birth		Nationality		Country of Birth	
ID Card No/Passport No					
Visa type (for Non Thai Applicants)			Visa Expiration Date		
Student No.	Faculty	Major		Level of education	
Degree/Certificate <input type="checkbox"/> B.A <input type="checkbox"/> M.A. <input type="checkbox"/> Ph.D.		Course <input type="checkbox"/> Regular Program <input type="checkbox"/> Special Program			
Home Address				Mobile Phone No.	
Mailing Address				E-mail Address	

****elaborate handwriting******PARENT OR GUARDIAN'S INFORMATION**

Name:			
Nationality:		Religion:	
Occupation:		Organization/ Work Place:	
Office Address:			
Office Phone No:	Fax No:	Mobile Phone No:	E-mail Address:

I certify that the above information is complete, true, accurate and allow the dormitory's staff to request further information or records for verification. When I was determined to stay in this dormitory, I promised to comply with all regulations and willing to pay for damages caused by the actions of me.

Signature	Date
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Name of Advisors:**Telephone No:**