

Mahidol University International College MUIC Financial Aid Grants

MOIC		
Trimester	Academic Year	

					Date			
1.	Per	rsonal Detail						
		Student's Name						
		Student ID. Number				Major		
		Identification Number	er			Nationality		
		Current address						
		Telephone	Mobile	e Phone .		E-mail		
2.	Fa	mily Background						
	2.1	Family Status						
		☐ Living together	☐ Separated	d 🗆 D	ivorced	☐ Father passed away ☐	Mot	her passed away
	2.2	Father's name					Age	years
		Occupation				Income per month		baht
		Home address						
		Housing status	□ owned	□ re	ented	☐ dependent		
	2.3	Mother's name				A	ge	years
		Occupation				Income per month		baht
		Home address						
		Housing status	□ owned	□ re	ented	☐ dependent		
	2.4	Guardian's name				A	.ge	years
		Occupation				Income per month		baht
		Home address						
		Housing status	\square owned	□ re	ented	☐ dependent		
	2.5	Numbers of sibling	((includin	g applica	nt) Please specify respecti	vely	
N	o.	Name - Surna	ame	Age	Work p	place or Educational Institut	ion	Income / baht
1	1.							
2	2.							
3	3.							
4	1.							
	2.6	Parent's or Guardian	's debt					
		□ None						
		□ Some	Please estin	mate		baht		
		□ A lot	Please estin	mate		baht		

3.	Financial Background
	3.1 Payment from family or guardian per month baht
	From 🗆 Fatherbaht 🗆 Motherbaht
	☐ Guardianbaht ☐ Otherbaht
	3.2 Tuition fees per trimester baht (please estimate)
	3.3 Personal expenses per month baht (excluded tuition fees)
	☐ Residential expensesbaht ☐ Transportationbaht
	☐ Educational expenses baht ☐ Otherbaht
	3.4 Having a job for earning extra money
	□ None
	☐
	3.5 Please estimate your reasonable amount of money per month that you need for your living
	baht
4.	Services activities contribution (if any)
	Mention your activities and services you had made a significant contribution to MUIC or the societ
	which had helped to promote the good name of the college and our own.
	Express your reasons and needs of this scholarship
5.	Documents Submitted
	☐ A copy of Thai ID. card or A copy of Passport
	☐ A copy of Student ID. card
	☐ Statement(s) stating the financial problem(s)
	☐ Certificate(s) showing in participating extracurricular activities
	☐ Other(s)

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I hereby declare that the information I have supplied in this form is complete and correct in every
detail. I realize that it is an offence to make a false or misleading statement.
Signature of applicant
()
Date
Please draw a map to your house
Parent / Guardian Proof of Information
I am Mr./Mrs./Miss is Father/Mother/Guardian of
Mr./Miss (applicant's name). I declare that the
information my have supplied in this form is correct in every detail.
Cinnothum of committee
Signature of guardian
()
Date