



Admission to Graduate Program

ICO NIDA Office use only	Important Information					
Student ID: ICO NIDA Scholarship:	 O In order for this application to be effective the applicant must sign and include all documentation requested. O Please return your completed application form and documentation to ICO NIDA Students Admissions Department or to one of the ICO NIDA's authorized representatives. O Students Admissions Department, International College of NIDA (ICO NIDA) 118 Moo3, Serithai Road, Klong-Chan, Bangkapi, Bangkok 10240 THAILAND. O For more information please visit www.ico.nida.ac.th or email iconida_apply@nida.ac.th 					
Acceptance date:	1. Personal and Contact details					
Responsible officer ID:	Title:					
Approval:	First name:					
1	Surname:					
2	Email Address:					
3	Home Phone:					
Remarks	Permanent/Home Address:					
2. Preferred Program	m of Study					
☐ MA (Management)						
Preferred classes Preferred study plan Preferred double/exchang	□ Regular Program (Weekdays) □ Weekend Program □ Plan A (Thesis Plan) □ Plan B (Independent Study) ge program aboard □ Yes □ No					
☐ Ph.D. (Management)					
3. Residency Status						
b) What country are you a C) What is your nationality?	u born?citizen?					

4. Proficiency in English								
c) Have you taken an Eng	ate studies conducted in English? glish Language proficiency test in t	☐ Yes the last 2 y	rears? □ Yes	"yes", please provide □ No	a certified true copy of evidence) and a certified true copy of evidence	·)		
5. Previous Educa	tion (most recent)							
Year of Graduation	Name of Award/Program	٨	Main Field of St	tudy (majors)	Institution			
6. Employment Experience (<i>most recent</i>)								
Years Employed	Years Employed Description of Position			Employer	Full or Part Time			
7. Other Qualification / Membership of Professional Bodies, Clubs or Foundations								
The state of the s								
8. Referees								
	Name / Employer / Position			Contact Details				
9. Personal Statement								
Please write a short paragraph (300-500 words) on why you wish to undertake the program and why should ICO NIDA choose you (Attach a								
separate page outing your reasons) OR Send a short video (1-2 minutes) on why you wish to undertake the program and why should ICO NIDA choose you (You can attach YouTube link								
or CD outing your reasons	s) (YouTube link:					.)		
10. How did you f	ind out about ICO NIDA	.?						
☐ Search engine ☐ ICO NIDA website ☐ Newsletter/Newspaper ☐ Brochure ☐ Poster ☐ Educational events ☐ Educational agent ☐ Employer ☐ Colleagues ☐ Friends ☐ NIDA's Students ☐ others (Please specify)								
11. Declaration								
I declare that the information submitted is correct and complete. I authorize ICO NIDA to obtain information concerning my academic record from any school, university or other institution attended by me. I agree to inform ICO NIDA promptly should I be excluded, suspended or expelled from any tertiary institution during the period of my enrolment at the University. I consent to the collection, storage and disclosure of information concerning any acts of record falsification or other irregular acts in relation to my academic record. I acknowledge that ICO NIDA may vary or reverse any decision made on the basis of incorrect or incomplete information supplied by me. Signature of Applicant: Name in full: Date:								