



Sandee Language School APPLICATION FORM

Full Name: (Mr./Miss/Mrs.) _____
FIRST NAME MIDDLE NAME LAST NAME

Gender: _____ Age: _____ Date of Birth: _____ Place of Birth: _____
DD/MM/YYYY (01/Jan/1999) (CITY YOU WERE BORN)

Race: _____ Religion: _____
(ASIAN, CAUCASIAN/WHITE, LATIN, ETC.) (CATHOLIC, CHRISTIAN, MUSLIM, BUDDHIST, ETC.)

Nationality: _____ Passport Number: _____

CURRENT ADDRESS IN THAILAND

Room/House Number: _____ Apartment/Condominium Name: _____

Road: _____ Sub-district: _____ District: _____

Province: _____ Post Code: _____

Thai Mobile Number: _____ Email: _____ LINE ID: _____

What is the highest level of education you completed? Please tick (✓) only one.

___ Elementary School ___ High School ___ Diploma
___ Bachelor's Degree ___ Master's Degree ___ Others (Ph.D., etc.) _____

Complete Home Country Address (IN YOUR COUNTRY):

NOTE: If parents are DECEASED (already passed away), no need to write their information.

Father's Full Name: _____ Nationality: _____

Occupation/Work: _____ Religion: _____

Mother's Full Name: _____ Nationality: _____

Occupation/Work: _____ Religion: _____

Emergency Contact Person in Thailand:

Full Name: (Mr. / Miss / Mrs.) _____

Home or Work Address: _____

Mobile Number: _____