



**Graduate Programs, International College of Medicine,
Thammasat University
Doctor of Philosophy & Master of Science
in Dermatology
(Academic year 2024)**

Application for Admission

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Paste a one-inch photograph

First name – Last name

English Proficiency Test Record	
English proficiency test	<input type="checkbox"/> TU-GET Examination dateScore.....
	<input type="checkbox"/> TOEFL Examination date.....
	PBT Score..... CBT Score.....IBT Score.....
	<input type="checkbox"/> IELTS Examination date..... Score.....
	<input type="checkbox"/> Other.....
	Examination date..... Score.....

1. **First name – Last name** (Mr., Miss., Mrs.)

2. **Sex** Male Female

3. **Nationality** **Race** **Religion**

4. **Date of Birth** **Month** **Year** **Age (year)**

5. **Occupation** **Income**..... **Baht/Month**

6. **Marital status** Single Married Other

7. **Father’s occupation** **Mother’s occupation**.....

8. Application in a graduate program

8.1 Master of Science in Dermatology

Clinical Dermatology Plan A 2 (Thesis)

Cosmetic Dermatology Plan A 2 (Thesis)

8.2 Doctor of Philosophy in Dermatology

Plan A 1 (Thesis)

1.1 Pass Mc.S. (2 Year)

1.2 Pass Bc.S. (4 Year)

Plan A 2 (Thesis)

1.1 Pass Mc.S. (3 Year)

1.2 Pass Bc.S. (4 Year)

9. Source of financial support during tenure of study

Work

Parents

Scholarship by.....

Require scholarship

During application process: specify source.....

Other

10. Education Record

Level	University/Institute	Degree granted / Field of Study	Period	GPA
Bachelor's				
Master's				
Other				

11. Employment Record

Position	Organization	Period

12. Office address

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Post-code..... Phone Fax. E-mail.....

13. Home address

.....

Post-code..... Phone Fax. E-mail.....

14. Attached Supporting Document (Scan document or 300 dpi photograph)

- Recent photograph (~1 inch)
- I.D. card or Passport
- English proficiency test
- Academic transcripts
- Degree certificate
- Medical License
- Internship certificate
- Curriculum vitae
- Three letters of recommendation (one from current supervisor)
- Other academic supporting document please specify

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(ex. publication, research experience, presentation, award or official supporting document)

15. Research Interest.....
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Graduate Program, Chulabhorn International College of Medicine,
Thammasat University, Rangsit Campus, 99 Moo 18 Phaholyothin Road, KlongLuang Districts,
Pathumthani, 12120, THAILAND
E-mail : techno.cicm@gmail.com
Tel. 0-2564-4444 Ext. 4494 - 4495

Applicant's signature.....

Date

<p>Application Fee:</p> <p>Paid by <input type="checkbox"/> Bank account transfer.</p> <p><input type="checkbox"/> Direct payment: Receipt No. Date.....</p> <p>Staff's signature</p> <p>(Staff only)</p>
