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| **APPLICATION FORM FOR STUDENT INTERNSHIP** | | | | | | | |
| Objective: | | | | | | From (dd-mm-yy): | To (dd-mm-yy): |
| Name (Please underline your family name): | | | | | | | |
| Date of birth: | | Age: | | Sex: | | Nationality: | |
| Institution/University: | | | | | | | |
| Mailing address:  Tel (Including country code): Fax: E-mail: | | | | | | | |
| Passport No: | | Date of issue: | | Date of expiry: | | Place of issue: | |
| Educational qualification: | | | Subject/Field: | | | | |
| English proficiency | Spoken: Excellent/Good/Fair/Poor | | | | Written: Excellent/Good/Fair/Poor | | |
| Computer proficiency (Software and Programming Languages known) |  | | | | | | |
| Relevant courses/subjects attended:  1)  2)  3) | | | | | | | |
| Research interest for the internship (Please give the details of your research interest mentioning the technology/methodology you would like to use. Use a separate page if necessary): | | | | | | | |
| Means of financial support: | | | | | | | |
| The undersigned certifies that the above-mentioned statements are true, complete and correct.  Applicant’s signature: Place/Date: | | | | | | | |
| The applicant is a bona fide student and hereby recommended for the internship for the duration mentioned above.  Signature of the Institute Head/Authorised Person Designation/Official Seal: Place/Date: | | | | | | | |
| Please fill up this form clearly and submit it in an A4 size paper by e-mail, fax or by post to the address given below  Affix your recent photograph  **Geoinformatics Center**  Asian Institute of Technology  P.O. Box 4, Klong Luang  Pathumthani 12120, THAILAND  Tel: +66-2-524-6184/6195  Fax: +66-2-524-6147  E-mail: geoinfo@ait.ac.th | | | | | | | |