

CHIANGMAI UNIVERSITY

Application for Employment

| อัตราเลขที่ |
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| เลขที่ประจำตัวสอบ |
| (I for Office Use Only) |
| Applied Position : |
| Office In : |
| Degree/Certificate Obtained: |
| 1. Personal Information |
| 1.1 Mr./Mrs./Ms, First Name and Last Name : |
| |
| 1.2 Date of Birth : |
| Citizen of : Nationality : Religion : |
| 1.3 Marital status : Single Married Divorced Widowed |
| 1.4 Name of spouse : |
| Presently employed at : |
| Position : |
| 1.5 Permanent Home Address : |
| 1.6 Present Address : Moo : Road : |
| District : Amphur : |
| Province : |
| Mobile : |

2. Education Background

| Educational | Degree/Certificate | Major | Name of Institution | Year | Grade |
|-------------|--------------------|-------|---------------------|-----------|---------|
| Level | | | | Degree | Point |
| | | | | Conferred | Average |
| | | | | | |
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3. Employment History (Fast with latest position)

| M/Y of employment | | Organization | Position | Mai n | Salary | Reasons fpr |
|-------------------|----|--------------|----------|------------------|--------|-------------|
| From | То | | | Responsibilities | | leaving |
| | | | | | | |
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- 4. Present Occupation :
 Position :

 Final Salary :
 Bath/Month Organization :

 Starting date of Employment :
 Telephone :
- 5. Academic Reference

| Title of Research Paper | Textbook (s) Published | Dates article (s) | Recognitive of |
|-------------------------|------------------------|-------------------|----------------|
| | | published in | Innovation |
| | | (magazine, etc.) | (Awards, etc.) |
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6. Training Courses attended

| Name Training | Institute of Training | Degree/Certificate | Period of Training |
|---------------|-----------------------|--------------------|--------------------|
| | | Obtained | (M/Y) |
| | | | |
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| 7. Special Abilities : | |
|--|----------------|
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| | |
| 8. Reference : | |
| 8.1 Mr./Mrs./Ms., First Name and Last name : | Relationship : |
| How long have you know this person ? | Position : |
| Organization / Address : | |
| Telephone :e-Mail : | |
| 8.2 Mr./Mrs./Ms., First Name and Last name : | |
| How long have you known this person ? | Position : |
| Organization / Address : | |
| Telephone :e-Mail : | |

I certify that all statements made in this application are true and complete. I understand that any misrepresentation of facts would be subject to disqualification and/or immediate dismissal of my employment without any compensation.

Applicant's signature

(Day) (Month) (Year)