



Application Form for Partial Tuition Fee Support Scholarship
for Postgraduate Students in Master of Science Program and Doctor of
Philosophy Program in Biochemistry (International Program),
Faculty of Science, Mahidol University

Full Name

Student ID ☐ Master's Degree ☐ Doctoral Degree

Mobile Phone

E-mail Address

Major Advisor

Scholarship in the first year ☐ (please specify)

☐ none

Date of thesis title approval and thesis advisory committee appointment

Date of passing the thesis defense examination

I, hereby, certify that the information above is true.

(signature)

(.....)

Student

Date

(signature)

(.....)

Advisor

Date

