

AIR - PSG

Artist in Residence / Student Exchange Faculty of Painting Sculpture and Graphic Arts, Silpakorn University Application for Student Exchange

Type of scholarship

University of the Arts Bremen, Germany
(Master degree and Bachelor degree year 4-5)

Application for Student Exchange for

April till July, 2022

Please attach all of the following documents.

- 1. Application for artist in residence / student exchange
- 2. Study/research plan or Motivation letter
- 3. Recommendation letter from student's adviser
- 4. Latest transcript / grade
- 5. Portfolio
- 6. Photocopy of main passport pages

The deadline for submitting application

Exchange students that do not require the transferring of the grade: <u>2 months before the term begins.</u>
Exchange students that require the transferring of the grade: <u>4 months before the term begins.</u>

Passport photo

taken within past 6 months

Personal details: Personal information - type or print clearly					
Family name(Block Letters)					
First name (Block Letters)					
Gender					
CountryPostcode					
Address for correspondence (if different)					
Country Postcode					
Home Country telephone number (incl. Code) (+)					
E-mail Address ID Line:					
Education Background					
Bachelor Degree: Field					
Period of Study (month / year) from to to					
Institution					
Country GPA GPA					
Master Degree: Field					
Period of Study (month / year) from to to					
Institution					
Country GPA (If applicable)					
Professional Background:					
Record of any professional experience (additional pages can be included)					
- Please provide the title, description of nature of the work, year or period of conducting or exhibiting					
Intended work or research during the exchange study program					
Please outline below the nature of work you wish to undertake during your exchange period /or the specific program					
you intend to follow.					

Language Proficiency

(Mother Tongue.....)

Language	Reading	Writing	Hearing	Speaking
Thai	Good / Average / Poor			
English	Good / Average / Poor			
Other	Good / Average / Poor			

Disability / special needs	
Please provide full details of physical or sensory disability which ma	nay in some way affect your ability to work or may
require special facilities.	
Any other information you wish to add	
Declaration	
I confirm that to the best of my knowledge, all the information I ha	ave given on this form is correct.
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Signa	nature
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	Date

Contact: PSG International Affairs

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