



Form 1 A

Application of student allowance receiving
Mahidol University

Written at :

Date:

I, (Mr./Mrs./Ms.) Age: years
Address :
State/Province : Zip :
Country : Telephone Number :

I have been informed and understood Mahidol University Notification Re: Rule of student allowance disbursement of Mahidol University B.E. 2559 (A.D. 2016) clearly, hereby I offer the application to president of Mahidol University as follows;

As I am (Mr./Mrs./Ms.).....
Student of....., Mahidol University who completely paid for health care service to Mahidol University in accordance with Mahidol University Notification above. I have ability loss of that caused unable to study continuous on Date.....Month.....Year....., because of; detailed in the attached medical opinion.

I am as, apply this application for student allowance receiving according to Mahidol University Notification Re: Rule of student allowance disbursement of Mahidol University B.E. 2559 (A.D. 2016) as the following list (check box with ✓ symbol) :

- 1. Applying as student, for Baht (.....)
- 2. Applying as the heir according to law or legal representative;
 - 2.1 Father, for Baht (.....)
 - 2.2 Mother, for Baht (.....)
 - 2.3 Spouse, for Baht (.....)
 - 2.4 Child, for Baht (.....)
 - 2.5 Guardian, for Baht (.....)

3. Applying as the attorney from
According to power of attorney dated following the
attached for Baht (.....)

The allowance total Baht(.....)

I hereby certify that statements above in this application are true and complete.
If it appears that I have no right or power to receive the allowance amount
..... Baht (.....) whether all or some part. Whether
any reason, I agree to reimburse to the university of the allowance that I have no rights
or unauthorized to receive with interest of 15% per year from the date of the allowance
receiving until the date of completion reimburse.

Signed Applicant
(.....)

Signed Witness
(.....)

Signed Witness
(.....)

- Note**
1. This form shall only use for the case that student had ability loss of any physical fitness, if in case student died, the applicant shall use Form 2 A
 2. “Legal representative/Guardian” means father and, or mother legally of minor child, or the guardian who appointed by testament of dead father or mother, or the guardian ad litem.
 3. “Heir” means heir at law such as parent, spouse and child.