



Student Internship Application Form
Aviation Personnel Development Institute

To Advisor and APDI Director:

First name Last name
Student's first name Last name
Student ID number Address
Telephone number E-mail
Total Cumulative Credits credits. (1st Year - Present) GPAX.

Internship Organization's Name
Address Floor Building Soi Street
Sub-district (Tombon) District (Ampur)
Province Postal Code
Telephone E-mail

Name of Internship Coordinator:

First Name Last name
Position Telephone Extension
E-mail
Internship Period from to
Total hours: 200 hours.

Required Documents:

- 1. A Copy of Student Identification Card.
2. A Copy of Identification Card/Passport
3. A Copy of House Registration.
4. Transcript Semester ... /.....
Internship Consent Letter from Guardian.
6. A Copy of Guardian's Identification Card.
7. Kasem Bundit University Student Internship Contractual Agreement.
8. Five Photos of Intern (1 inch.)
9. TOEIC Score.....

(Mr./Ms.....)

Student's Name

Table with 2 columns: Advisor's comment and Director's Comments. Includes fields for signatures and dates.