



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: 300 hours.

Required Documents:

- 1. A Copy of Student Identification Card.
2. A Copy Identification Card/Passport
3. A Copy of House Registration.
4. Transcript Semester /
5. 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 checkboxes for Approved and Unapproved, and signature lines for Advisor and APDI Director (Dr. Meta Ketkaew).