Objective

1. Specialist for foreigners who want to study and practice a new and effective way of learning to speak, read and write Thai language.
2. To learn Thai in a friendly environmental which specially prefer to meet the everyday needs of foreigners living in Thailand.
3. To grip the exploration and fascination of Thai culture, Thai traditional style of life while learning Thai Language.
4. To provide an academic service in the educational field for public and community need.

Time/Schedule

<table>
<thead>
<tr>
<th>Group</th>
<th>Date</th>
<th>Time</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group 1</td>
<td>Tuesday &amp; Thursday</td>
<td>13.00–16.00</td>
<td>City Campus</td>
</tr>
<tr>
<td>Group 2</td>
<td>Tuesday &amp; Thursday</td>
<td>18.00–21.00</td>
<td>City Campus</td>
</tr>
<tr>
<td>Group 3</td>
<td>Saturday</td>
<td>13.00–16.00</td>
<td>Hua Mak Campus</td>
</tr>
</tbody>
</table>

Qualify applicant: Foreigners live in Thailand and want to know basic Thai language for everyday needs and communication.

Tuition fee: 3,500 baht/course
Course evaluation: 80% of attendance is required and pass the examination from ASCE institute.

Admission Schedule: April 1, 2009 – June 7, 2009; Monday–Friday: 8.30a.m.– 6.30p.m.

* 10% discount for ABAC staffs, ABAC students and alumni

Assumption University
Assumption Hall 5½ Floor
Hua Mak Campus 592/3 Ramkhamhaeng 24, Hua Mak, Bangkok Thailand 10240
Tel. 02–719–1515#1222,1316, 02–318–3838, 081–427–5959,082–244–5464
http://www.asce.au.edu
Application Form

1. Personal Information

1.1 Family name...............................First name.................................Middle name.............................

NAME (CAPITAL LETTERS) ( ) MR. ( ) MRS. ( ) MS. ( ) OTHER

FIRST NAME

LAST NAME

1.2 Date of birth..............................City of birth......................................Age........year

1.3 Present address

No………..Moo………Soi………………………… Road.......................................................District…………………………..City………………………Province……………………………..

Zip code………Telephone/Mobile ................................E-mail address.................................

1.4 Employment record

Name of employer………………………………… From (Month/Year)……………………

Type of activity…………………………………………………………………………………………...

Address and telephone of employer……………………………………………………………………

2. Education

Post secondary, university or equivalent……………………………………………………………………

Degree / Certificate or diploma obtained……………………………………………………………………

Type of education………………………………………………………………………………………………
3. Reference name

3.1..........................................................................................................................................................
3.2..........................................................................................................................................................

4. Additional documents

( ) 1. Copy of passport
( ) 2. Copy of Visa

By signing below, the undersigned affirms that the information submitted herewith, to the best of his/her knowledge, is accurate at the time this application is submitted

................................................. Signature of applicant
(.................................................)

Date (D/M/Y)....../....../.......