

ฉบับภาษาอังกฤษ

Application Form

Committee of NIDA Student Union

National Institute of Development Administration

Fiscal Year 2026

Applicant Information

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **President of the NIDA Student Union** for Fiscal Year 2025.

Team Name: _____

Applicant Signature: _____

Date: _____

Committee Members

1.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **the 1st Vice President of the NIDA Student Union for Fiscal Year 2025.**

Applicant Signature: _____

Date: _____

2.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number:_____

Mobile Phone Number:_____

Email Address:_____

Facebook:_____

Line ID:_____

Position Applied For

I would like to apply for the position of **the 2nd Vice President of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

3.

Title (Mr./Mrs./Miss): _____

First Name:_____

Surname:_____

Faculty:_____

Student ID: _____

Address:_____

Telephone Number:_____

Mobile Phone Number:_____

Email Address:_____

Facebook:_____

Line ID:_____

Position Applied For

I would like to apply for the position of **the Secretary of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

4.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **the Treasurer of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

5.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **the Hospitality Coordinator of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

6.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **the Academic Chairman of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

7.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number: _____

Email Address: _____

Facebook: _____

Line ID: _____

Position Applied For

I would like to apply for the position of **the Sports Chairman of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

8.

Title (Mr./Mrs./Miss): _____

First Name: _____

Surname: _____

Faculty: _____

Student ID: _____

Address: _____

Telephone Number: _____

Mobile Phone Number:_____

Email Address:_____

Facebook:_____

Line ID:_____

Position Applied For

I would like to apply for the position of **the Public Relations Chairman of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

9.

Title (Mr./Mrs./Miss): _____

First Name:_____

Surname:_____

Faculty:_____

Student ID: _____

Address:_____

Telephone Number:_____

Mobile Phone Number:_____

Email Address:_____

Facebook:_____

Line ID:_____

Position Applied For

I would like to apply for the position of **the Head of Welfare Affairs of the NIDA Student Union** for Fiscal Year 2025.

Applicant Signature: _____

Date: _____

Compliance Statement

I hereby acknowledge that I understand the regulations set forth by the National Institute of Development Administration (NIDA) regarding the NIDA Student Union, including But not limited to B.E. 2532 (1989) (Regulation No. 2), B.E. 2534 (1991) (Regulation No. 3), B.E. 2539 (1996) (Regulation No. 4), B.E. 2540 (1997) (Regulation No. 5), and B.E. 2556 (2013). I certify that I will adhere to all prescribed regulations.