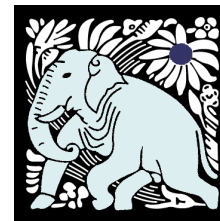


# Asia Pacific Scholarship Consortium

Masters Scholarships for Individuals

from Myanmar, Cambodia, Thailand and Lao PDR



P.O. Box 196, Chiang Mai  
University Post Office,  
A. Muang, Chiang Mai,  
50202, Thailand  
apsconsortium@gmail.com

All information in this form will be kept **strictly confidential** and will be read only by members of the APSC selection committee. You **MUST** answer all questions clearly in English.

**Application Deadline: November 15, 2012**

\*The free Adobe Reader (version 7.0 or higher) is required to complete this application. If you do not have the free Adobe reader, you can download it here: [http://www.adobe.com/products/acrobat/readstep2\\_allversions.html](http://www.adobe.com/products/acrobat/readstep2_allversions.html)

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_



## Course Preferences

List up to three courses from the **Course List** on pages 3-6 in the [APSC Scholarship Overview](#). Use the drop-down menu here to select your choices.

Your course choices do not have to all be from the same general subject area, but you should select the options that best reflect your interests, experience and goals. Please refer to [www.apsconsortium.org](http://www.apsconsortium.org) for additional information on any of these courses.

1: \_\_\_\_\_

2: \_\_\_\_\_

3: \_\_\_\_\_



## Academic Interests

Please use the space below to tell us more about your academic goals and interests. This information will help us match winning applicants with university programs and faculty offering relevant opportunities.

In your answer, please respond to the following questions: What are your main academic goals and interests? What are possible thesis and research topics you might want to focus on during your masters studies? Explain how your background, education, and employment prepared you to study this subject at the graduate level.



## Biographical Information

APPLICANT NAME:

(As listed on official documents)

MALE

FEMALE

NICKNAMES:

MARRIED

SINGLE

CURRENT ADDRESS:

DATE OF BIRTH:

*Day*

*Month*

*Year*

RELIGION:

ETHNICITY:

EMAIL:

PHONE NUMBER:

DO YOU HAVE ANY CHILDREN? IF YES, HOW MANY?

### Please note:

It is particularly important that we can contact you between December 12th-16th, 2012 to inform you about shortlisting and schedule interviews.

If you are out of contact during that time, you may lose the opportunity to be selected for the program.

Contact [apsconsortium@gmail.com](mailto:apsconsortium@gmail.com) if you must be contacted by phone instead of email during these dates.



## Educational Background

List your educational history, starting with your most recent qualifications.

	Name of Institution	Location	From	To	Grades/GPA	Qualification Received
1:						
2:						
3:						
4:						
5:						
6:						

### TRAININGS

Please list the most relevant trainings you attended. Please **DO NOT** send copies of your training certificates with this application.

	Name of Training	Training Organization	Year	Duration	Certificate Received
1:					
2:					
3:					
4:					
5:					
6:					



## Work Background

Applicant Name \_\_\_\_\_

List your work history, starting with your most recent job. Include volunteer positions and community work, and attach additional pages if necessary.

1:

EMPLOYER: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you were with this organization:

REASON(S) FOR LEAVING (be specific):

2:

EMPLOYER: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you were with this organization:

REASON(S) FOR LEAVING (be specific):

3:

EMPLOYER: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you were with this organization:

REASON(S) FOR LEAVING (be specific):



## Other Information

### LANGUAGE PROFICIENCY

USE THE SPACE PROVIDED TO INDICATE YOUR PROFICIENCY IN LANGUAGE(S):

Proficiency Key: 1=Basic Knowledge; 2=Proficient; 3=Fluent; 4=Native Language

Language	Speaking	Reading	Writing	Comprehension
English (required)				

### ENGLISH LANGUAGE TESTING

Please refer to the APSC 2013 Overview for more information regarding APSC's partnership with the Exam Preparation Outreach Program (EPOP). If you have an existing English score, please enter it here. **Applicants who do not have any English score (TOEFL or IELTS) are required to take the EPOP online diagnostic exam BEFORE the November 15th deadline.**

To register for the diagnostic exam, please email [apsconsortium@gmail.com](mailto:apsconsortium@gmail.com) with the following information:

1. Your full name (**spelling must be consistent with your legal Identification information**)
2. Your email address
3. The city where you currently live
4. The country where you currently live

You will then be given instructions on how to complete the online diagnostic exam. If you are in a remote are with unreliable internet access and are concerned that you cannot take the exam, please email [apsconsoritum@gmail.com](mailto:apsconsoritum@gmail.com) for assistance.

**AN APPLICATION WITHOUT AN ENGLISH SCORE WILL BE CONSIDERED UNCOMPLETE.**

Type of Exam	Date of Exam	Score

### INTERNATIONAL TRAVEL

Please indicate ALL extensive (more than one month) travel, study, or work that you have had outside your home country.

Country Visited	Length of Stay	Year	Reason for Travel (Holiday, Study, Work)



## Essay Questions

### PAST EXPERIENCE

Describe your background including your family, childhood and education. Please provide an example of a challenge, either personal or professional, that you have faced and what actions you took in response. Please write a thorough response in the space below.

### FUTURE GOALS

Describe your career goals and how receiving this scholarship would help you achieve those goals. Provide specific examples of what you would like to achieve in the future. Please write a thorough response in the space provided below.



## Document Checklist

PLEASE COMPLETE THIS APPLICATION AND EMAIL IT TO APSCONSORTIUM@GMAIL.COM.

YOUR APPLICATION WILL BE PROCESSED MORE QUICKLY IF IT IS FILLED IN ELECTRONICALLY, BUT HAND-WRITTEN OR SCANNED COPIES OF THIS DOCUMENT ARE ACCEPTABLE IF YOU ARE UNABLE TO COMPLETE THIS DOCUMENT ON A COMPUTER. PLEASE DO NOT MAIL ORIGINAL DOCUMENTS TO APSC BY POST, AS WE WILL BE UNABLE TO RETURN THEM.

**IN ADDITION TO THIS APPLICATION FORM, PLEASE SUBMIT SCANNED COPIES OF THE FOLLOWING DOCUMENTS. PLEASE DO NOT INCLUDE HIGH SCHOOL DOCUMENTS OR CERTIFICATES FROM NON-UNIVERSITY TRAINING PROGRAMS. PLEASE BE REMINDED THAT PASSPORT IS NOT REQUIRED TO APPLY.**

- Copy of undergraduate degree certificate (or explanation as to why this is not available).
- Copy of undergraduate final transcript (or explanation as to why this is not available).
- Copy of the page of the photo page of passport and pages showing expiration date extension (if available).
- Copy of results from one of the following:
  1. Any official English language testing you have taken, such as TOEFL or IELTS
  2. EPOP TOEFL Diagnostic Exam
- ✓ One ACADEMIC recommendation using the APSC Reference Form, emailed **directly** by your referee.
- ✓ One PROFESSIONAL recommendation using the APSC Reference Form, emailed **directly** by your referee.

I certify that the above information is correct. I understand that all of the credentials submitted in support of my application to Asia Pacific Scholarship Consortium will become property of APSC and  are not returnable to me. I authorize APSC to share my application, recommendations, and transcripts with the APSC Scholarship Committee, and relevant universities. I further understand that, if accepted into the program, I will provide any additional information required to facilitate the scholarship process.

Type Full Name Here

Date: