

Kasetsart University

Pledge / Consent Form

Student's First Name..... Family/Last Name.....

With the consents of my parents. I hereby pledge to Kasetsart University that:

1. I would dutifully study, abide by the university rules and regulations and fulfill all the requirements under the undergraduate program I am role in.

2. I am willing to take courses in other KU campuses, if necessary, to complete the requirements of my undergraduate study.

3. I acknowledge that, consistent with Kasetsart University regulations, I may be subject to penalty, including fines or dismissal, if commit a misdeed that defies University rules and regulations.

4. I agree to participate in required University activities such as the Initiation to Knowledge of the Land program (Orientation for New students) and other activities supporting University causes.

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Student's signature (readable)

Parent/Guardian's Pledge/Consent

Parent/Guardian's Name)..... Family Name.....

Occupation..... Position.....

Work Name and Address:

Home/Contact address: House no.....Street..... Sub-district.....

District..... Province.....Country.....

Post Code..... Tel. no..... Relationship to student.....

Student's name.....Here is referred as
"under my guardianship"

I hereby certify/pledge/certify/consent to the Kasetsart University that:

1. The student under my guardianship has a record of good behavior and has never been involved in activities that may jeopardize his/her reputation/image and association; also, he/she does not have significant illnesses or health problems that would impede his/her abilities to successfully continue his/her education at Kasetsart University.

2. I certify that I will advise the student under my guardianship to engage in and abide by the university rules and regulations;

3. If the student is not already financially independent, I will provide the financial support needed for the student's studies including all living costs and incidental fees incurred during his/her study at Kasetsart University.

4. I consent to Kasetsart University to record, retain and use the information I am providing, to be entered into the student's personal information file and new student registration records, including fingerprints and photos of the student under my guardianship. This information may be requested from the student in order to permit entry into the classroom, exam room, graduation ceremony, to participate in various activities, to get academic support services on campus, or to otherwise participate in online registration or record-keeping, which shall be maintained solely by Kasetsart University.

5. I consent for Kasetsart University to record and transfer information of the student under my guardianship for purposes of Kasetsart University activities. Information used includes the following:

- 5.1 Identification number
- 5.2 Name prefix – Name – Surname (Thai and English)
- 5.3 Passport number and foreign address (case of foreign student)
- 5.4 Gender
- 5.5 Date of birth
- 5.6 Nationality
- 5.7 Address
- 5.8 Mobile and/or home phone no.
- 5.9 E-mail
- 5.10 KU Student ID no.
- 5.11 Photo
- 5.12 Barcode and QR code

I affix my signature below to certify that I will abide by my pledge / consent.

Date..... Month..... Year.....

Signature of parent/guardian.....

Signature of witness.....