



## **Consent Agreement**

### **(Outbound Postgraduate Research Student Exchange Program)**

For those who wish to take part in the Outbound Postgraduate Research Student Exchange Program at Chulalongkorn University, please read the information below and provide your signature as proof of acknowledgement.

I, as an applicant to an participate in the Outbound Postgraduate Research Student Exchange Program held by Chulalongkorn University, fully understand and accept to the terms and conditions as indicated below

#### **STUDENT DECLARATION**

- ☒ I understand that Chulalongkorn University has the right not to accept my application.
- ☒ I understand that it is my responsibility to provide all documentary evidence requested in this application.

#### **EXCHANGE TERMS AND CONDITIONS**

- ☒ I understand that I will not be allowed to withdraw from the Outbound Postgraduate Research Student Exchange Program after receiving acceptance letters and documents for visa application from partner university; withdrawal will only be permitted for serious and compelling reasons, such as accidents or serious illnesses with documentary evidence.
- ☒ I understand that Chulalongkorn University is not responsible for any financial losses incurred due to the cancellation of the exchange program by the host or home institution or any other costs. I will not be able to refund any of the fees and expenses that I have shouldered in participating in the program such as airfare and visa application. I will be responsible for any resulting cancellation fees and additional expenses.

#### **VISA**

- ☒ I understand that Chulalongkorn University is not responsible for issuing a visa for students.



## PERSONAL DATA

- ☒ I understand that it is necessary for Chulalongkorn University to collect and process some student personal data for records and the implement of the Outbound Postgraduate Research Student Exchange Program.
- ☒ I hereby consent the transfer of personally identifiable education records or a portion of my educational records to partner university for nomination and application process.

I have read this agreement and freely sign it. By my signature, I acknowledge that I read, understood, and agreed to comply with this agreement as defined above.

Signature \_\_\_\_\_

Name in Full \_\_\_\_\_

Chula Student ID \_\_\_\_\_

Faculty/School/College \_\_\_\_\_