

Application Form

Embedded Systems Training Alliance for Thai Engineer : ESTATE 2007



Notes : Please complete in English or Japanese using a typewriter or in block letters.
 Please write your name and date of birth as are written in your passport.
 Please tick () with ✓ mark.

1. Personal Information

Name (in English)	First	Middle	Family				
	Registered name in passport within 30 digits, underline the name by which you are formally addressed.				() Male	() Married	
Name (in Thai)					() Female	() Single	
Nationality		Country of Residence		Date of Birth		Age	Religion
				Day	Month	Year	
Home Address							
Tel:		Fax:		E-mail:			

2. Educational background

School name	Schooling years	Main subjects	Language used
High school	from to		
Technical/Vocational school	from to		
University/College (Bachelor Degree)	from to		
(Master Degree)	from to		
Post-Graduate course	from to		

3. Employment record

Name of organization	Years of service	Position	Job description
	from to		
	from to		
	from to		
	from to		
	from to		

6. Knowledge of Embedded Systems

Assembly	C	Device Driver	Level of Knowledge
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	4 Using it frequently
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	3 Made program with in
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	2 Studied before
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	1 Never studied before

Digital or Analog Circuit Design	Microcontroller (MCS51, AVR, ARM and.....)	Interfacing (USB, Ethernet, TCP/IP, CAN and Field Bus, RS 232 or 485, IDE/PCI and.....)	Level of Knowledge
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	4 Using it frequently
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	3 Made program with in
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	2 Studied before
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	1 Never studied before

RTOS	Linux	Tools (Compiler, Debugger, In Circuit Emulator and.....)	Level of Knowledge
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	4 Using it frequently
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	3 Made program with in
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	2 Studied before
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	1 Never studied before

Software Development Process	Project Planning	Project Management Plan	Level of Knowledge
<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	4 Using it frequently
<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	3 Made program with in
<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	2 Studied before
<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	1 Never studied before

*If you have not enough space for this table, please attach an additional sheet of paper. Please write more detail about your knowledge and skill Embedded Systems.

7. Year of your business experience related to Embedded Systems

No less than 1 year 1 – 2 years more than 2 years

8. Health Condition

You are physically and mentally fit to complete this intensive training program.

Yes No

Day _____ Month _____ Year _____

Name of the candidate

Signature
