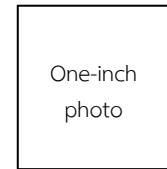


(This translation has been provided for communication purpose only)

**Application for License for
Practice of the Art of Healing through Chiropractic**



Written at.....

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

1. Name (Mr./Mrs./Miss).....Surname.....

Age.....years Date of birth (D/M/Y).....

Nationality.....Race.....Religion.....

2. Address in Thailand (according to the House Registration)

House Number.....Alley/Lane.....Village Number.....

Road.....Sub-district.....

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

Postcode.....Telephone.....Fax.....

For a passport holder: Passport Number.....issued by.....

stay in Thailand from Date.....Month.....Year.....

until DateMonth.....Year.....

Curriculum completed...../ Duration.....(years)

University name.....

Country.....Work experience from (year).....to (year)

3. Current address for contact

House Number.....Alley/Lane.....Village Number.....

Road.....Sub-district.....

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

Postcode.....Telephone.....Fax.....

4. Current workplace..... Number.....

Alley/Lane.....Village Number.....Road.....

Sub-district.....District.....Province.....

Postcode.....Telephone.....Fax.....

5. I would like to apply for the License for Practice of the Art of Healing through Chiropractic

in accordance with Section 31 of the Practice of the Art of Healing Act, B.E. 2542 (1999),

and I have attached the following documents herewith:

- 5.1 Three one-inch straight face pictures without a cap/hat or sunglasses
(Polaroid not allowed)
- 5.2 One copy of House Registration or proof of permission to stay in Thailand for not less than 3 years.
- 5.3 A copy of ID Card (for non-Thai, use one copy of passport)
- 5.4 A copy of a degree certificate in Chiropractic or a certificate of graduation and award of a degree in Chiropractic (Original document)
- 5.5 A medical certificate (according to the prescribed form)
- 5.6 Other evidence (Please specify).....

Signature.....Applicant
Print name (.....)