



# Mahidol University

Faculty of Medicine Siriraj Hospital  
Sirindhorn School of Prosthetics and Orthotics

## COMPREHENSIVE PRACTICAL EXAMINATION (CPE) APPLICATION FORM

<b>1. Name in full</b>	(FAMILY NAME)	(MIDDLE NAME)	(FIRST NAME)
	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.		
<b>2. Nationality</b>		<b>3. Date of birth</b>	(Day) / (Month) / (Year)
<b>4. Address</b>	(Home)		
	Telephone:		
	E-mail:		
<b>5. Year of graduation</b>			

**Instructions:** Hereby, request:

**TO SUBMIT** application for entry to the comprehensive practical examination

**I further acknowledge and understand the following the statement:**

- The comprehensive practical examination is an international accreditation for ISPO category I Certificated for Professional Prosthetist and Orthotists.
- The comprehensive practical examination is hereby, offered to the current final year students from Sirindhorn School of Prosthetic and Orthotics, Faculty of Medicine Siriraj Hospital, Mahidol University for free of charge.

*(In addition, If graduates of SSPO who have not previously applied to take the examination or those graduates who did not pass the examination on a previous attempt, would now like to apply to take or re-take the examination, they are required to pay an application and examination fee.*

**I hereby certify my statements above to be true and correct.**

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date