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**MEMORANDUM OF UNDERSTANDING**

**between**

**<NAME OF INSTITUTION>:, <COUNTRY>**

**and  
FACULTY OF ENGINEERING, KHON KAEN UNIVERSITY, THAILAND**

<Name of Institution> <(Institution abbreviation)>, (Country) and Faculty of Engineering, Khon Kaen University (EN-KKU), Thailand agree to enter into a formal collaborative agreement based on a foundation of trust for the mutual benefit and development of the two institutions and the promotion of international understanding and goodwill.

1. <….> and EN-KKU will jointly develop some or all of the following activities based on their respective academic and educational needs:
   1. exchange of research materials, publications and information;
   2. development and operation of joint academic programs;
   3. support for distance learning courses, with mutual written consent before expenses are incurred;
   4. exchange of students;
   5. exchange of academic staff;
   6. exchange of administrative and other non-academic staff;
   7. co-operation in the recruitment of students.
2. The implementation of exchange programs under this agreement shall be separately negotiated and determined by both universities.
3. Nothing shall diminish the full autonomy of either institution, nor will any constraints or financial obligations be imposed by either upon the other in carrying out the agreement.
4. This Memorandum is subject to revision or renewal by mutual agreement. It is also understood that either institution may terminate the agreement at any time, although such action will only be taken after mutual consultation in order to avoid any possible inconvenience to all parties.
5. The Memorandum will be valid for five years and become effective when the representatives of both institutions have signed and dated the document.

**AUTHORIZED TO SIGN FOR AND ON BEHALF OF <NAME OF INSTITUTION>:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in Capitals: (Authorized person)

Position in Organization: (Position)

Address in Full: (Address)

(Tel:)

(Fax:)

**AUTHORIZED TO SIGN FOR AND ON BEHALF OF FACULTY OF ENGINEERING**

**KHON KAEN UNIVERSITY:**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name in Capitals: ASSOCIATE PROFESSOR DR. RATCHAPHON SUNTIVARAKORN

Position in Organization: DEAN, FACULTY OF ENGINEERING

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