LOGO

| Letter No   |
|---|
| Address   |
| Month, Date / Year  |
| Subject: Application for Associate Membership of AUN - HPN                                      |
| Dear President of Mahidol University (Chair of the AUN-HPN International Advisory Committee),   |
| On behalf of [Your University Name], I am writing to express my interest in applying f          |
| associate membership of the ASEAN University Network - Health Promotion Network (AUN-HPN        |
| As a [Public/Private] university in [Country], we proudly hold a longstanding commitment        |
| promoting health and well-being within our student body, faculty, staff, and the surrounding    |
| communities.  |
| Joining AUN-HPN aligns perfectly with our ongoing endeavors. We envision the network            |
| a valuable platform for fruitful collaboration with esteemed regional universities. Moreover, v |
| meet the membership criteria as follows:  |
| 1. We ensure the values, vision and mission of the AUN-HPN and have no conflict                 |
| interest.   |
| 2. We are active in the areas of health promotion, health sciences, and public heal             |
| since we have a faculty of science and health technology.                                       |
| 3. We have an ability to engage in the network's activities and support the network             |
| agenda based on our own resources.  |
| [Your University Name] aligns wholeheartedly with AUN-HPN's mission to promo                    |
| health and well-being throughout the region. We firmly believe in the transformative power      |
| education and collaborative action in addressing public health concerns.                        |
| Thank you for your consideration. We are confident that our partnership will yield fruitf       |
| outcomes for all involved, contributing significantly to the advancement of health promotion    |
| across ASEAN.   |
| Yours sincerely,  |
|   |
| ()  |
| President of University   |
| Contact person:   |

Tel: ...... / Email address: .....