



Request Form for Retaining Student Status (Undergraduate student)

Receive No.....Date.....
..... Receiver

Subject: To retaining student status

Student ID

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To: Dean of faculty

Name Mr. / Mrs. / Miss.....

Address..... Tel.

Faculty ☐ Faculty of Science ☐ Faculty of Education ☐ Faculty of Humanities and Social Sciences
☐ Faculty of Economics and Business Administration ☐ Faculty of Fine Arts
☐ Faculty of Health and Sports Science ☐ Faculty of Technology and Community Development
☐ Faculty of Law ☐ Graduate School ☐ Management for Development College

Type of Study ☐ Full-time ☐ Part-time/ Special Course Major..... Minor.....

I would like to retain student status ☐ First semester ☐ Second semester ☐ Summer Academic year.....

Reason (s) for retaining student status.....

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Signature.....Applicant

(.....)

...../...../.....

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Procedure of Approval

1. Advisor's Comment Signature..... Advisor (...../...../.....)	2. Dean's command <div style="text-align: center;"> <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved </div> Signature..... Dean (...../...../.....)
3. Registration department Recorded data Signature..... Officer (...../...../.....)	4. Financial Department Service paid: The receipt No. Vol. Price.....baht. Signature..... Financial official (...../...../.....)