Request Form for Thesis Proposal Examination Graduate School

Valaya Alongkorn Rajabhat University under the Royal Patronage Pathum Thani

(Mr. / Mrs. / Miss.)	Student ID
Student O Master's degree O Doctoral degree	e Field of study
Semester enteredAcademic Year	
I would like to take proposal examination Thes	sis total credits
E -mail	
Thesis Title in English	
Thesis Advisory Committee are as follows:	
Advisor	
Co- Advisor	
Co- Advisor	
	Signature
	Student
	()
	DateMonthYear
Opinions of the Thesis Advisory Committee $oldsymbol{\square}$ agre	ee that the examination is acceptable.
Advisor	Signature
	Signature
	Signature
Only for Program Committee	Signature
Propose the appointment of proposal examination committee	()
☐ Thesis	Program Director
Date of examination DateMonthYear	DateYear
Time	Signature
Examination room	()
1Chairman	Deputy Dean of Graduate School
2Committee	DateYearYear
3Committee	Signature
4	
5. External-Committee 6. Committee and Secr	
o Continuee and sec	DateYearYear