BANGKOK UNIVERSITY GRADUATE SCHOOL REQUEST FOR THESIS COMMITTEE

Name	<u></u>	Stude	ent ID :
Progr	ram		
Number of credits completed:			G.P.A
_			
Propo	osed Title of Thesis:		
	Proposed Committee Members		Acknowledgement
 2. 	(Advisor's Name)	<u> </u>	(Advisor's Signature)
Z. <u> </u>	(Co-Advisor's Name)		(Co-Advisor's Signature)
		_	Student's Signature
		Contact Numl	ber :
		E-m	nail :
For G	Graduate School Approved (Student may start working on Not approved	n Chapters 1-3	with committee members.)
Rema	arks:		
			Program Director
			/ /

- 1. This form has to be returned to the Graduate School within two weeks after registration.
- 2. After completing Chapters 1-3, student must submit 2 copies of draft for thesis proposal to the Graduate School and fill out FGS/TI 002, <u>one month</u> prior to the scheduled date of thesis proposal defense.

BANGKOK UNIVERSITY GRADUATE SCHOOL REQUEST FOR THESIS PROPOSAL DEFENSE

Name :				_ Student ID :					
Program _									
Title of The	esis :								
	"I cert	ify that the stude	ent is rea	ady for proposa	ıl defense."				
1.									
<u> </u>	(Advisor's Name)			(Advisor's Signature)					
2									
	(Co-Advisor's Name)			(Co- <i>F</i>	Advisor's Signature)				
Proposed	Date of Present	tation :							
Day:	Date:	Month:		Year:	Time:				
Proposed	Date of Present	tation (Second Cho	ice) :						
•				Year:	Time:				
				 C+	udent's Signature				
					/				
			Со	ntact Number :					
				E-mail :					
	ate School								
Approved	Date of Presen				Year:				
S = . D									
Grad Repre	esentative:								
				Dean of th	ne Graduate School				
					/ /				

Remarks:

^{**}Student must submit 2 copies of draft for Chapters 1-3 to the Graduate School <u>one month</u> prior to the scheduled date of thesis proposal defense.**

BANGKOK UNIVERSITY GRADUATE SCHOOL

REQUEST FOR THESIS FINAL DEFENSE

Name :			_ Student ID :				
Program							
Title of Thesis :							
"I ca	rtify that the sto	udent is 1	eady for fina	al defense "			
	itily that the st	udent is i	eady for fine	de derense.			
1. (Advisor's Nam			(Advisor's Signature)				
`	,			(Navisor 5 Signature)			
	(Co-Advisor's Name)			(Co-Advisor's Signature)			
Proposed Date of Present			.,				
Day: Date:	Month:		Year:	Time:			
Proposed Date of Present	ation (Second Ch	oice) :					
Day: Date:	Month:		Year:	Time:			
				Student's Signature			
				/			
		Со	ntact Number : .				
			E-mail :				
For Graduate School							
Approved Date of Present	t ation : Day:	Date:	Month:	Year:			
	Time:		Venue:				
CHE Representative:							
Grad Representative:							
			uean c	of the Graduate Schoo /_/)(

Remarks:

^{**}Student must submit 2 copies of draft for the whole thesis to the Graduate School <u>one month</u> prior to The scheduled date of thesis final defense.**