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| IMG-7225.JPG | **WALAILAK UNIVERSITY**  **Graduate Students**  **/นักศึกษาระดับบัณฑิตศึกษา** | **General Request Form**  **/คำร้องทั่วไป** |

Direction/ข้อชี้แนะ:

Complete all applicable fields and submit the form to College of Graduate Studies thru the School/College/College of Graduate Studies/กรอกข้อมูลให้ครบถ้วนและส่งแบบฟอร์มมายังบัณฑิตวิทยาลัยฯ ผ่านสำนักวิชา/วิทยาลัย

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| 1 | General Information/ข้อมูลทั่วไป |

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| Title/คำนำหน้า | | | | | | | | | □ Mr./นาย | | | | | | | | □ Mrs./นาง | | | | | | | | | | | | □ Miss/นางสาว | | | | | | | | | | | | |  | | | | | | |
| Name-Surname/ชื่อ-สกุล | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | Student ID/รหัสนักศึกษา | | | | | | | | | |  | | | | | | | | |
| Studying for/กำลังศึกษา | | | | | | | | | | | □ Master’s degree/ระดับปริญญาโท | | | | | | | | | | | | | | | | | | | | | | | | | | | □ Doctoral degree/ระดับปริญญาเอก | | | | | | | | |  | |
|  | | | | | | | | | | | Plan/แผน | | | | | | | | | | |  | | | |  | | | | | |  | | | | | | Type/แบบ | | | |  | | | | |  | |
| Program in/หลักสูตร | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| School of/College/College of Graduate Studies/สำนักวิชา/วิทยาลัย/บัณฑิตวิทยาลัย | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
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| **Being on further study scholarship contract with Walailak University/ได้ทำสัญญารับทุนกับมหาวิทยาลัยวลัยลักษณ์** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □ None/ไม่ได้รับทุน | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| □ Master Degree Excellence Scholarships | | | | | | | | | | | | | | | | | | | □ Ph.D. Excellence Scholarships | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □ Partial Tuition Fee Scholarships | | | | | | | | | | | | | | | | | | | □ Scholarships for High Potential Candidates to Enroll in Doctoral Programs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| □ Walailak University Graduate Scholarships | | | | | | | | | | | | | | | | | | | □ Others/อื่นๆ โปรดระบุ | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
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|  | **Starting the scholarship on/เริ่มรับทุนเมื่อ** | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | |  | | | |  | | | |
|  | Date/วันที่ | | | | | | | | | | |  | | | | | |  | | | | | | |  | | Academic year/ปีการศึกษา | | | | | | | | | | | | |  | | |  | | | | | |
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| Contact Information/ข้อมูลติดต่อ (Mobile/E-mail) | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Request for/มีความประสงค์** | | | | | | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
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| \*Students who receive monthly allowances has been allowed to out of campus with a limit of 15 consecutive days for personal reason.  \*นักศึกษาที่ได้รับทุนที่มีค่าครองชีพรายเดือน สามารถลาไปนอกสถานศึกษาด้วยกิจส่วนตัวได้ไม่เกินระยะเวลาต่อเนื่อง 15 วัน ต่อภาคการศึกษา | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | For your consideration/เพื่อโปรดพิจารณา | | | | | | | | | | | | | | | | | |  | | | | | | | | **2** | | | Advisor/อาจารย์ที่ปรึกษา | | | | | | | | | | | | | | | | | | |
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| Sign/ลงนาม | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | Sign/ลงนาม | | | | | | | |  | | | | | | | | |  | | | | |
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|  | | | | | | | Graduate Students/นักศึกษา | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | Academic Advisor/อาจารย์ที่ปรึกษา | | | | | | | | |  | | | | |
| Date/วันที่ | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | Date | | | | | | | |  | | | | | | | | |  | | | | |
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| 3 | | | Head of Program Committee/ประธานคณะกรรมการบัณฑิตศึกษาประจำหลักสูตร | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | Comments/ความเห็น | | | | | | | | | | |  | | | | | | | | | | | |  | | Sign/ลงนาม | | | | | | |  | | | | | | | | |  | | | |
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| 4 | | | College of Graduate Studies/บัณฑิตวิทยาลัยฯ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **4.1** | **Officer of CGS/เจ้าหน้าที่บัณฑิตวิทยาลัยฯ** | |  |  | | | | | | | |
|  | Accepted the form on/รับคำร้องเมื่อวันที่ | | |  | Sign/ลงนาม | |  | |  | | |
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|  |  |  | |  |  | | Service Officer/จนท. บวล. | |  | | |
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| **4.2** | **Dean of CGS/คณบดีบัณฑิตวิทยาลัยฯ** | | | | | | | | | | |
|  | Comments/ความเห็น |  | |  | Sign/ลงนาม | | |  | | |  |
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|  |  | | |  |  | Dean of College of Graduate Studies  /คณบดี บวล. | | | |  | |
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