



Memorandum

Department College of Graduate Studies Tel 76481-3

MHESI Date

Subject An Approval for Monthly Allowances from Scholarships for High Potential Candidates to Enroll in Doctoral Program

To Head of Division of Finance and Accounting

I am ☐ Mr. ☐ Ms. ☐ Mrs. Student ID
 from School of ☐ Master ☐ Doctoral program in

..... I am on further study with financial support from Scholarships for High Potential
 Candidates to Enroll in Doctoral Program (scholarship contract No.)

The scholarship is commencing on From academic year until In
 this semester, I have enrolled credit(s) of thesis.

Contact Address

Tel E-Mail I request for an approval of
 the monthly allowances for with the total amount of
 bath (.....)

Sign..... Scholarship recipient
 (.....)

Date/...../.....

** If the recipient fails to secure advance permission from the CGS for being absent from the campus, the scholarship
 provider holds the authority to withhold allowances throughout the period of absence.*

1 An approval of thesis advisor

.....

Sign Thesis Advisor
 (.....)

Date/...../.....

College of Graduate Studies (CGS)

2

Documents checked

Sign.....
 (Miss Niramorn Boonsang)
 CGS officer

3 Dean of College of Graduate Studies

☐ Approved
☐ Disapproved because

Sign
 (Assoc. Prof. Dr. Phongpichit Channui)
 Dean of CGS

I request to receive the total amount of money as Bath by transferring to Bank
 Branch, Account No., Account Name

Sign.....
 (.....)

Receiver

Date/...../.....

Sign
 (.....)

Payer

Date/...../.....

Note : 1) A copy of scholarship contract was attached with first request memorandum.

2) A copy of national ID card or passport