

Application Form for Master's and Doctoral Thesis Scholarship for the Academic Year.....

Name (Mr./Mrs./Ms.)..... Current level of study Master's Doctorate

Student Code /

Field Faculty/Institute/College



Contact address

.....Tel. Email :

Thesis title ENGLISH :

THAI :

Thesis committee

- 1. MAJOR ADVISOR
- 2. MEMBER
- 3. MEMBER

Field of application Science / Technology Social science / Humanities Health Science

Date of English proficiency test completion Day.....Month.....Year.....

Expected graduation date

Never received any scholarship

Scholarship Used to receive a scholarship (name and date of scholarship)

History Currently receiving a scholarship (name of scholarship)

Total amount of scholarship to be received

Signature(Applicant)

Required documents : (.....)

1. A copy of thesis proposal Date/...../.....

2. A copy of the thesis committee appointment order

<p>Statement of Verification by Major Advisor</p> <p><input type="checkbox"/> Student has never received any scholarship</p> <p><input type="checkbox"/> Student's scholarship has expired</p> <p><input type="checkbox"/> Student is now receiving scholarship, but the total amount does not exceed 50,000 per year</p> <p>Signature.....</p> <p>(.....)</p> <p>Date...../...../.....</p>	<p>Opinions of the Head of the Program Committee</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Signature.....</p> <p>(.....)</p> <p>Date...../...../.....</p>
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