



King Mongkut's University of Technology Thonburi

Request Form for Study Extension

Date Month Year

Title Request for study extension No....

To Thesis Advisor

I, Mr. / Ms. / Miss Student ID.

Faculty Program Field of Study

would like to request for study extension for one more semester, for the semester

Rationale(s) for this request

Rationale(s) for last request (if any)

The incomplete process is namely:

- o Experiment and conclusion
o Thesis Writing
o Waiting for defense
o Defended and being process the correctness
o Others (Please specify)

Please kindly considerately approve.

Signed (Student)
(.....)

To Head of the Department of

Mr. / Ms. / Miss conducts the research entitled
I, as a thesis advisor, would like to
express comments towards the research that

Please kindly further handle.

Signed (Thesis Advisor)
(.....)
...../...../.....

To Dean
I agree that

Signed (Head of the Department)
(.....)
...../...../.....

To President
The faculty committee on the meeting
no. date agree to propose for the
Academic Council's approval.

Signed (Dean)
(.....)
...../...../.....

To
The Academic Council on the meeting
no. date agree that

Signed (Secretary)
(.....)
...../...../.....