Sor Sor Wor .11

Received no. .....
Date ...../...../.....
Recipient .....

Request for transferring to another institute

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

Subject: Request for transferring to another institute

Dear Director, Office of the Registrar,

I (Mr. / Mrs. / Miss / Ms.).....

student code [ ][ ][ ][ ][ ][ ][ ][ ] curriculum ..... program of study..... group.....

a student of [ ] regular [ ] non–regular (SAT–SUN) [ ] non–regular (FRI–SUN) [ ] others .....

type of degree [ ] four years [ ] five years [ ] continuing program [ ] others .....

current address .....

postal code.....phone no.....

would like to transfer from CMRU to .....

In semester ..... academic year.....because.....

.....

by [ ] proceeding documents myself [ ] proceeding documents by CMRU

For your consideration.

Yours sincerely,

Signed .....

(.....)

① **Guardian 's opinions** .... Signed ..... : Guardian ...../...../.....	④ **Dean's opinions** .... ( ) Approved ( ) Disapproved Signed..... : Dean ...../...../.....	⑥ **Office of the registrar's opinions** ..... ( ) Approved Signed ..... : Director ...../...../.....
② **Advisor's opinions** .... Signed ..... : Advisor ...../...../.....	⑤ **Academic Resource's opinions (Library)** .... Signed ..... : Director ...../...../.....	⑦ **Fee paid at finance** amount.....baht Book no. ..... no..... Signed ..... : Officer ...../...../.....
③ **Program's opinions** .... Signed ..... : Head ...../...../.....		

Date appointed for results **...../...../.....**

Request for transferring to another institute Received no..... **Date appointed for results ...../...../.....**

Signed .....: Officer

...../...../.....

(**Please present this slip for following up the results**)