Office use only
Request no
Received/



Document enclosed ☐ A copied student card/Citizen ID card ☐ Medical certificate	_
Others (please specify)	

REQUEST FOR SUSPENSION OF STUDY/ MAINTAINING STUDENT STATUS

	Written at						
Date:							
Dear Dean of Faculty of Science,							
(via ☐ Deputy Dean for Education ☐ Deputy Dean for Corporate Communication and International Relations							
☐ Assistant Dean for International Program ☐							
I am (Mr./ Miss)							
Faculty							
Admitted through Direct A	Admission/ round		TCAS/ round	Transfer Admission			
Mobile phone number: E-mail:							
would like to request for \square suspension of study \square maintaining student status in \square 1st semester \square 2nd semester of the							
academic year							
deddeline year							
(I) SUSPENSION OF STUDY			(II) MAINTAINING STUDENT STATUS				
\Box 1 st semester \Box 2 nd semester/ academic year			\square 1 st semester \square 2 nd semester/ academic year				
for the following reason:			for the following reason:				
O Disciplinary suspension	from university		O Receive a scholarship for Student Exchange Program				
	semester/ Academic year		(please specify)				
O Illness (please enclose a medical certificate)			☐ 1 st semester ☐ 2 nd semester/ Academic year				
O Be drafted into the military (please enclose a military			O All required courses have been completed, but still have not met the following requirements:				
notice/ใบสค.35)			☐ The English Proficiency requirement has not				
O Personal reason			been satisfied.				
O Others (please specify)			☐ The senior project/ senior project writing has not				
Student has enrolled courses in the suspended semester.		r.	been completed.				
O Yes O No			☐ Others (please specify)				
I hereby confirm the	at the information provided	d in this	s request form is true and accu				
i neresj comi m ene	it the imprimental provided		_				
				(Student's signature)			
			() (Student name)			
Date/							
Remark: If the above information is false or incomplete or without good cause, the student is not allowed to suspend the study/ maintain							
student status.							
Parents'/ Guardians' consent							
	Parents / (Guardi	ians' consent				
I (Mr./ Mrs./ Miss)	am the F	Parent o	or Guardian of (Mr./ Miss)				
Relationship to student:	Mobile	phone	number:				
attention in his/her study constantly.							
(Parent/ guardian's signature)							
		(``````````````````````````````````````	(Parent/ guardian)			
1. Advisor/ Head of International	2. Head of Department / School	(3) ()	Deputy Dean for Corporate	5. Dean's comment			
B.Sc. Program in's	of's comment		nication and International Program				
comment		_	Assistant Dean for International Program				
O Approved O	O Approved O Disapproved	O App	oroved O Disapproved	O Approved			
Disapproved	**		• •	O Disapproved			
Reason(s)	Reason(s)		ı(s) ignature	Reason(s)			
()	()		()	Signature			
· · · · · · · · · · · · · · · · · · ·			outy Dean for Corporate	(Assoc. Prof. Prasit Suwannalert, Ph.D.)			
Advisor/ Director of International	Head of Department/ School of	Com	Communication and International Dean of Faculty of Science				
B.Sc. Program in			tions				
O Assistant Dean for International Program							
Date/	Date/		Date//	Date//			