

Office use only

Request no. /
Received / /



Mahidol University
Faculty of Science
International Program

Document enclosed

A copied student card/ Citizen ID card
 Medical certificate
 Others (please specify)

**REQUEST FOR RE-ADMISSION
(For RETIRED STUDENT)**

This form is only for retired students who have been dismissed from Mahidol University for academic dismissal or administrative withdrawal or disciplinary dismissal

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 Programs

I am (Mr./ Miss) Student I.D.:

Faculty Major Year Cumulative GPA

Admitted through Direct Admission/ round TCAS/ round Transfer Admission

Mobile phone number: E-mail:

wish to be re-admitted as a student in 1st semester 2nd semester of the academic year.....

I am dismissed from the program in 1st semester 2nd semester of the academic year..... for the following reason:

ACADEMIC DISMISSAL	ADMINISTRATIVE WITHDRAWAL	DISCIPLINARY DISMISSAL
<input type="radio"/> Failure to maintain a minimum cumulative GPA of 2.00 <input type="radio"/> Failure to complete course after 3 attempts (4 attempts, in case of unforeseen circumstance) <input type="radio"/> Exceeding program completing time limits <input type="radio"/> Others (please specify).....	<input type="radio"/> Failure to register for courses <input type="radio"/> Failure to pay tuition fees on time <input type="radio"/> Incomplete or late submission of required documents <input type="radio"/> Visa/ immigration issues <input type="radio"/> Others (please specify)	<input type="radio"/> Examination cheating <input type="radio"/> Violence or threats <input type="radio"/> Harassment/ bullying/ sexual misconduct <input type="radio"/> Substance abuse/ illegal activities on campus <input type="radio"/> Repeated minor misconduct <input type="radio"/> Others (please specify)

I confirm that the information given in this request form is true and accurate.

..... (Student's signature)

(.....) (Student name)

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

Parents'/ Guardians' consent			
I (Mr./ Mrs./ Miss) am the Parent or Guardian of (Mr./ Miss)			
Relationship to student: Mobile phone umber:			
I hereby certify that I do take care of (Mr./ Miss) to pay more attention in his/her study constantly.		 (Parent/ guardian's signature)
(.....) (Parent/ guardian name)			

1. Advisor/ Head of International B.Sc. Program in's comment	2. Head of Department / School of.....'s comment	(3) <input type="radio"/> Deputy Dean for Corporate Communication and International Relations <input type="radio"/> Assistant Dean for International Programs	5. Dean's comment
<input type="radio"/> Approved <input type="radio"/> Disapproved Reason(s)..... Signature (.....) Academic advisor/ Director of International B.Sc. Program in Date/...../.....	<input type="radio"/> Approved <input type="radio"/> Disapproved Reason(s) Signature (.....) Head of Department/ School of Date/...../.....	<input type="radio"/> Approved <input type="radio"/> Disapproved Reason(s)..... Signature (.....) <input type="radio"/> Deputy Dean for Corporate Communication and International Relations <input type="radio"/> Assistant Dean for International Programs Date/...../.....	<input type="radio"/> Approved <input type="radio"/> Disapproved Reason(s)..... Signature (Assoc. Prof. Prasit Suwanalert, Ph.D.) Dean of Faculty of Science Date/...../.....