

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-ENROLLMENT (For CURRENT STUDENT)**

This form is for current students who have suspended their studies and maintained their 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 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 resume my study in ☐ 1st semester ☐ 2nd semester of the academic year.....

I am allowed to ☐ suspend my study/ ☐ maintain my student status in ☐ 1st semester ☐ 2nd semester of the academic year.....for the following reason:

(I) SUSPENSION OF STUDY	(II) MAINTAINING STUDENT STATUS
<input type="checkbox"/> 1 st semester <input type="checkbox"/> 2 nd semester/ academic year.....	<input type="checkbox"/> 1 st semester <input type="checkbox"/> 2 nd semester/ academic year
for the following reason:	for the following reason:
<input type="radio"/> Disciplinary suspension from university <input type="checkbox"/> 1 st semester <input type="checkbox"/> 2 nd semester/ Academic year..... <input type="radio"/> Illness (please enclose a medical certificate) <input type="radio"/> Be drafted into the military (please enclose a military notice/ใบสค.35) <input type="radio"/> Personal reason <input type="radio"/> Others (please specify)	<input type="radio"/> Receive a scholarship for Student Exchange Program (please specify) <input type="checkbox"/> 1 st semester <input type="checkbox"/> 2 nd semester/ Academic year..... <input type="radio"/> All required courses have been completed, but still have not met the following requirements: <input type="checkbox"/> The English Proficiency requirement has not been satisfied. <input type="checkbox"/> The senior project/ senior project writing has not been completed. <input type="checkbox"/> Others (please specify)

I hereby confirm that the information provided 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 number:

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 (.....) 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 Suwannalert, Ph.D.) Dean of Faculty of Science Date/...../.....