## **International Studies Center**



## Kasetsart University

## **GENERAL REQUEST FORM**

Subject :										
To: Director										
Student's Name (Mr./Miss/Mrs.)			Sponsor							
Doctoral Degree	☐ Plan 1(1)	☐ Plan 1(2)	☐ Plan 2(1)	☐ Plan 2(2)						
Master Degree	Plan A(1)	Plan A(2)	☐ Plan B							
O Regular Program O Special Program O International Program O Golden Jubilee Program										
Student's ID No.:	Department:		Cam	ipus:						
Major Field: Minor Field: Minor Field:										
Semester/Year of Admission: Contact Phone No.:										
Thesis Title:										
Requesting for :.										
☐ Book Allowance ☐ Thesis / Research Budget ☐ Visa Reimbursement ☐ Scholarship Extension										
Others										
	Student's Signature:									
	Date:									
Advice/Recommendation :	Director/Recommendation :									
(Advisory Committee Chairman)	(Director of	International Stud	ies Center)							
Signature:			Signature:							
(	)		(	)						
Date:		Date:								
(FOR OFFICE USE ONLY)										

## **Checklist for Requesting Budgetary**

Document Items	Research Budget		Thesis	Book	Visa	Scholarship
	For Advisor	For Student	Printing	Allowance	Extension	extension
General Request Form	✓	✓	✓	✓	✓	✓
Receipt Form	✓	✓	✓	✓		
Power of attorney Form	✓					
Requesting letter from Advisor	✓					
Copy of Student ID card	✓	✓	✓	✓	✓	
Copy of Bank Book (first page only)	✓	<b>√</b>	✓	✓	<b>√</b>	
Copy of latest Registration Form	<b>√</b>	<b>✓</b>	<b>√</b>	<b>✓</b>	<b>✓</b>	
Thesis Proposal	✓	✓				
Approved Proposal			✓			
Receipt of Visa extension					✓	
The Official of Transcript						✓
Study Plan						✓
Recommendation Letter from Advisor						✓