

## Application Form for Qualifying Examination/Comprehensive Examination Faculty of Engineering, Chiang Mai University

Engineer	ing Major/Program	🗌 Master's Degree	☐ Ph.D
☐ Quali	fying Examination	☐ Type 1 / Plan 1 Academi	☐ Type 1.1/ Plan 1.1
☐ Comprehensive Examination		☐ Type 2 / Plan 2 Academi	□ Type 1.2 / Plan 1.2
		☐ Type 3 / Plan 3 Profession	nal 🗌 Type 2.1/ Plan 2.1
			☐ Type 2.2/Plan 2.2
I, Mr./Mrs	5./Ms	student ID	phone
Request	for qualifying test/ Comprehensive I	Exam No on the date	Time
The exar	mination venue	The list of examination	n committee members is as follows:
	1	The Committee Cha	airperson
	2	committee	
	3	committee	
	4	committee	
Therefor	e, I would like to ask you to conside	r and appoint members of the exa	mination committee.
		(Signed	student
		(	)
		/	/
(Please p	provide comments)		
		(Signed	Principal Advisor
		(	)
		/	/
☐ Agree	e, propose the dean to sign the orde	r/announcement $\square$ Other comme	nts
		(Signed)	
	(Assoc.Prof.Dr.Ukrit Mankong)		
	Acting on behalf of		
		the Faculty Chairperson of	the Graduate School Committee
	Statement of $\Box$ Qualif	ying Examination $\Box$ Comprehen:	sive Examination
I	Stuc	lent ID Ma	ster's/Ph D
	Study Typ		
	Assessment Result	s 🗆 <b>S</b> 🗆 <b>U</b> Sav	ve the letter <b>S</b> or <b>U</b> into the
	(Signed	The Committee Chairperson de	signated field. If edited, cross it
	(	) ou	t and sign it.
	/ /		