

No.

Date.

Time.



OFFICE OF THE POSTGRADUATE STUDIES, MAE FAH LUANG UNIVERSITY

Report form of Proposal Examination

PART 1:

Name: _____ Date: _____
Student ID: _____
Program: Doctor of Philosophy Program in Biotechnology Major: Biotechnology Plan: 1.1
School of Science _____ Date: _____ Time: _____ Place: _____
Type: Dissertation Thesis Independent study

OLD TITLE

Thai: XXXXXXXXXXXXXXXXXXXXXXXXXXXX

English: XXXXXXXXXXXXXXXXXXXXXXXXXXXX

NEW TITLE (CAPITAL LETTERS ONLY)

Thai: _____

English: _____

Examination Committee	Signature
1 Chairman : _____	_____
2 Committee : _____	_____
3 Committee : _____	_____
4 Committee : _____	_____
5 Committee : _____	_____

-2-

<p>Examination Evaluation Results:</p> <p><input type="checkbox"/> 1. Pass <input type="checkbox"/> Without conditions <input type="checkbox"/> With conditions from the committee suggestion</p> <p style="padding-left: 250px;">Submission date of the revised work _____</p> <p><input type="checkbox"/> 2. Fail / Re-examination on _____</p> <p>Reasons:</p> <p>_____</p> <p>_____</p> <p>_____</p>	
PART 2: For Program Committee	
<p>Comment / Consideration</p> <p><input type="checkbox"/> Approved as proposed</p> <p><input type="checkbox"/> Disapproved because _____</p> <p style="text-align: right; margin-right: 100px;">_____</p> <p style="text-align: center; margin-right: 100px;">(_____)</p> <p style="text-align: center; margin-right: 100px;">Chairman of Program Committee</p> <p style="text-align: center; margin-right: 100px;">Date ____/____/____</p>	
PART 3: For School Postgraduate Committee	
<p>Comment / Consideration</p> <p><input type="checkbox"/> Approved as proposed</p> <p><input type="checkbox"/> Disapproved because _____</p> <p style="text-align: right; margin-right: 100px;">_____</p> <p style="text-align: center; margin-right: 100px;">(_____)</p> <p style="text-align: center; margin-right: 100px;">Chairman of School Postgraduate Committee (Dean)</p> <p style="text-align: center; margin-right: 100px;">Date ____/____/____</p>	
PART 4: For Head of Office of the Postgraduate Studies	
<p><input type="checkbox"/> Acknowledged and Record into MIS system.</p> <p style="text-align: right; margin-right: 100px;">_____</p> <p style="text-align: center; margin-right: 100px;">(_____)</p> <p style="text-align: right; margin-right: 100px;">_____</p> <p style="text-align: center; margin-right: 100px;">Date ____/____/____</p>	

Suggestion

(_____)

Chairman

Date _____