

No. ....

Date. ....

Time. ....



**OFFICE OF THE POSTGRADUATE STUDIES, MAE FAH LUANG UNIVERSITY**

**Requested Form for Format Checking of  
Dissertation/Thesis /Independent Study**

Semester  First  Second Academic Year 2017

**PART 1: For Student**

**1.1 Personal details**

Name \_\_\_\_\_ Student ID \_\_\_\_\_

Study program Doctor of Philosophy Program in Biotechnology Major Biotechnology Plan 1.1

School of Science \_\_\_\_\_ E-mail: \_\_\_\_\_ Phone 0-1724-5632

Study level  Ph.D. Degree  Master's Degree

**1.2 Format checking of**

Dissertation  Thesis  Independent Study

**Dissertation/Thesis/Independent Study exam date :** \_\_\_\_\_

**Submission Deadline :** 01-04-1950

**(Within 90 days for Dissertation/Thesis and 60 days for Independent Study after exam date)**

Signed \_\_\_\_\_

( \_\_\_\_\_ )

Date

\_\_\_\_/\_\_\_\_/\_\_\_\_

**PART 2: For School**

Please check if all of the followings are done

- |                          |   |
|--------------------------|---|
| <input type="checkbox"/> | Title of the work is confirmed  |
| <input type="checkbox"/> | Abstract (Thai / English) are corrected                                 |
| <input type="checkbox"/> | The contents are corrected according to the exam committee' suggestions |
| <input type="checkbox"/> | Citations are complied with the standard format                         |
| <input type="checkbox"/> | Plagiarism check is approved  |

**I certify that the information provided above is true and the format checking can be proceed**

Signed \_\_\_\_\_ Advisor

( \_\_\_\_\_ Mr.test system )

Date

\_\_\_\_/\_\_\_\_/\_\_\_\_

Signed \_\_\_\_\_ Dean

( \_\_\_\_\_ )

Date

\_\_\_\_/\_\_\_\_/\_\_\_\_

**PART 3: For The Format Approver Committee**

Approved/The checker committee has been checking for printing style already. Collecting the documents for the approval of the compensation for printing check process

Approved Total \_\_\_\_\_ pages

Signed \_\_\_\_\_

( \_\_\_\_\_ )

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**PART 4: For Head of Office of The Postgraduate Studies**

Approved/ Collecting the documents for the approval of the compensation for printing check process

Signed \_\_\_\_\_

( \_\_\_\_\_ )

Date \_\_\_\_/\_\_\_\_/\_\_\_\_