

APPROVAL FORM FOR THESIS PROPOSAL

SUBMITTED TO THE GRADUATE PROGRAM ADMINISTRATIVE COMMITTEE

(USE CAPITAL LETTERS ONLY)

Name - Surname (Mr. / Mrs. / Ms.)..... Student ID

Level of Study Master's Doctoral

Department Field of Study..... Number of Thesis Credits

Thesis Title (in Thai)
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(in English / Use Capital Letters Only)
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Thesis Supervisor..... Tel.

Co-Supervisor (If Any) Tel.

Objectives
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Rationale and Hypotheses
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Detailed Research Procedures and Methods

Please Draw Straight Lines in the Blank Space Numbering 1 to 18 to Represent the Lengths of Time for the Various Steps for the Conduct of Research

(Month and Year the Research Starts)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

Expected Benefits

1.
2.
3.
4.
5.

Signature Graduate Student

(.....)

Date...../...../.....

