

Qualifying Examination Request Form

For Doctoral Students in the Materials Engineering Program

Department of Materials Engineering, Faculty of Engineering, Kasetsart University

For Doctoral Students in the Materials Engineering Program

Department of Materials Engineering, Faculty of Engineering, Kasetsart University

Full Name: ..... Student ID: .....

Enrollment Since Semester: ..... Academic Year: ..... Phone Number: .....

Thesis Title in Thai: .....

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Thesis Title in English: .....

.....

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I hereby request to take the **Qualifying Examination (Interview Format)**, with the following thesis advisors:

1. Thesis Advisor..... Signature .....

2. Co-Advisor..... Signature .....

3. Co-Advisor..... Signature .....

Student's Signature: ..... Date: ..... / ..... / .....

1)To: Head of the Department of Materials Engineering

The Program Chair proposes the following additional examiners:

1. .... Program Representative (Faculty Member)

2. .... Graduate School Representative

Signed,.....

(Assoc. Prof. Dr. Parinya Chakanrotrom)

Program Chair

Date: ..... / ..... / .....

2. To: Main Thesis Advisor / Program Chair

Approved as proposed by the Program Chair

Additional comments: .....

Signed,.....

(Assoc. Prof. Dr. Ratthhee Techaphaisancharoenkij)

Head of the Department of Materials Engineering

Date: ..... / ..... / .....