



<p>IUP Faculty of Engineering</p> <p>Regis. Number.....</p> <p>Date.....</p>
--

Request for Credit Transfer

Date..... Month.....Year.....

Re: Subject Transfer

Semester First Second Summer Academic year.....

I, Mr. / Ms. Student ID.....

Department of..... Faculty of Engineering, Kasetsart University

Mailing address

Telephone E-mail.....

Would like to request a credit transfer

- Case 1. Being a student of the KU pre-study project
- Case 2. It is in the criterion according to the regulations on bachelor's degree education, KU, 2016, item 20.1.
(A former student of Kasetsart University whose student status was terminated within 2 years)

Attachments.

- Certificate of request for course comparison.
- (Case 1.) Examination results of KU pre-study project.
- (Case 2.) KU transcript.

I hereby certify that the above statement is true in all respects.

Student's signature.....

<p>① Advisor's opinion.</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Not approve</p> <p>Reason (if any).....</p> <p>.....</p> <p>.....(Advisor)</p> <p>.....(Date/Month/Year)</p>	<p>③ Opinion of the IUP Director.</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Not approve</p> <p>Reason (if any).....</p> <p>.....</p> <p>.....(IUP Director)</p> <p>.....(Date/Month/Year)</p>
<p>② Opinion of the Head of the Department.</p> <p><input type="checkbox"/> Approve</p> <p><input type="checkbox"/> Not approve</p> <p>Reason (if any).....</p> <p>.....</p> <p>.....(Head of the Department)</p> <p>.....(Date/Month/Year)</p>	<p>④ Opinion of the Associate Dean.</p> <p><input type="checkbox"/> Approve <input type="checkbox"/> Not approve</p> <p>Reason (if any).....</p> <p>.....</p> <p><input type="checkbox"/> Office of Education Administration Director.</p> <p>Please consider the request.</p> <p>.....</p> <p>Associate Dean</p> <p>.....(Date/Month/Year)</p>

