



PROPOSAL EXAMINATION RESULT FORM

แบบฟอร์มรายงานผลสอบโครงร่างวิทยานิพนธ์

FIRST NAME Mr./Ms. .... LAST NAME .....

SEMESTER/ACADEMIC YEAR ..... / ..... STUDENT ID   -

PROGRAM

**Master Degree**

**Ph.D. Degree**

Program A1 : Research Oriented Project  
(2-year program)

Program 1.1: Research Oriented Project (3-year program)

Program 1.2: Research Oriented Project (5-year program)

Program A2: Research and Coursework  
(2-year program)

Program 2.1: Research and Coursework (3-year program)

Program 2.2: Research and Coursework (5-year program)

SCHOOL OF  BSE  ESE  IST  MSE

Research Title (CAPITAL LETTER only)

Place and Date of Defense

Date..... Time ..... Venue .....

Result of Research Proposal Defense

Passed

Passed with condition (please specify) .....

Not passed

1.....Chairperson

(.....)

2.....Committee

(.....)

3.....Committee

(.....)

4.....Committee

(.....)

5.....Committee and Secretary

(.....)

Acknowledged

Recorded by

.....

.....

(.....)

(.....)

Dean of School

Committee Secretary

Date .....

Date .....