



Request for Advisor and Co-advisor Appointment

1. Student's Name (Mr./Mrs./Miss).....Student ID
2. Degree and Plan Doctoral Degree Plan 1.1 Plan 1.2 Plan 2.1 Plan 2.2
 Master's Degree Plan A 1 Plan A 2
 Program.....Department.....Faculty.....
2. Dissertation Topic (if any)

4. Dissertation Code
5. Advisor/Co-advisor to be appointed (identified with academic position, expertness and responsibility):
 1.Name and Title of Advisor Responsibility %
 Field of Specialization Sign
 - 2.....Name and Title of Co-Advisor (If required) Responsibility %
 Field of Specialization Sign
6. To chairperson of graduate study / Faculty Committee
 Sign.....Chairman of the Program Committee Sign.....Head of the Department
 (.....) (.....)
 Date...../...../..... Date...../...../.....

For faculty official use only	Graduate study faculty committee
<p>Dear Chairperson of Graduate Study / Faculty Committee</p> <p>Please To consider and approve the advisor committee of (Mr./Mrs./Miss).....</p> <p>student ID No....., the student of</p> <p><input type="checkbox"/> Master <input type="checkbox"/> Ph.D. program in Environmental Management as the list above</p> <p>.....</p> <p>(.....)</p> <p>Date/...../.....</p>	<p>DECISION</p> <p><input type="checkbox"/> approved</p> <p><input type="checkbox"/> Non – approved</p> <p>(Reason).....</p> <p>(Signature)</p> <p>(.....)</p> <p>(Chairperson of Graduate Study / Faculty Committee)</p> <p>Date...../...../.....</p>

- Note: 1. Please fill the form by typing and limited to one page
 2. Inform to Graduate School after faculty's approval