



No. 0603.32.02(1)/.....

Subject:Cancel Class & make up class.....

Dear Director of the Institute for Fundamental Study

Name Mr. Ms Dr.

Academic Position atthe Institute for Fundamental Study

assigned to teach (Course code)

.....(Course title)

for students in M.S. Program Ph.D. program,

Semester 1 2 3 Academic Year I would like to...

Cancel class on (D/M/Y) at (Time Period)

and will make up class on (D/M/Y) at (Time Period)

Additional classes on (D/M/Y) at (Time Period)

Tuition on (D/M/Y) at (Time Period)

Because

I would like to teach in TA 212 (Academia Room) TA 213 (Physics Station Room)

and use checked equipment Computer Overhead Projector

Other (please provide detail).....

I have contacted the building and maintenance officer and I will be responsible for any lost to the room and checked equipment above.

It is considered to be the most favorable and in accordance with the rules prescribed.

.....Lecturer's Signature

()

Approval of Class cancel & Class replacement:

<p>① Approval by Academic Affairs officer</p> <p><input type="checkbox"/> Approved & Recorded</p> <p><input type="checkbox"/> Not Approved because</p> <p>.....</p> <p>.....(Signature)</p> <p>Miss Jirachaya Chomdaeng</p> <p>...../...../.....</p>	<p>② Approval by Buildings & Maintenance officer</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved because</p> <p>.....</p> <p>.....(Signature)</p> <p>Mr. Prasong Kaewnontun</p> <p>...../...../.....</p>
<p>③ IF Deputy Director of Academic</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved because</p> <p>.....</p> <p>.....(Signature)</p> <p>Assistant Professor Dr. Suchitra Sa-nguansin</p> <p>...../...../.....</p>	<p>④ IF Director</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved because</p> <p>.....</p> <p>.....(Signature)</p> <p>Assistant Professor Narongrit Maneejiraprakarn</p> <p>...../...../.....</p>