Rattanakosin International College of Creative Entrepreneurship
Rajamangala University of Technology Rattanakosin

Enrollment Form

Date.....

Name (Mr./Mrs./Miss) .....Student ID.....

Course..... Major..... Year.....

College..... Phone Number.....

Enroll Course(s) in semester..... (Academic Year).....As follows:

No.	Course code	Course Title	Credit(s)			Section	Time	Lecturer's Signature
			Theory	Practice	Total			
1								
2								
3								
4								
5								
6								
7								

Signature..... Signature..... Signature.....
(.....) (.....) (.....)
Advisor Program Chair Student

(For The Registration Officer)	(For financial Department)
.....	Receipt No. .....
.....	Total ..... Baht
Signature.....	Signature.....
(.....)	(.....)
The Registration Officer	Financial Officer
...../...../.....	...../...../.....