

Re-enrollment Form

Date.....
Name (Mr./Mrs./Miss) Student ID.....
Course..... Major..... Year.....
College..... Phone Number.....
Re-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								

Signature.....
(.....)
Advisor

Signature.....
(.....)
Program Chair

Signature.....
(.....)
Student

(For The Registration Officer) Re-enrollment free 10,000 (Baht Per Course(s)) Signature..... (.....) The Registration Officer/...../.....	(For financial Department) Receipt No. Total Baht Signature..... (.....) Financial Officer/...../.....
--	---