



Office of Academic, Chulabhorn Graduate Institute

**Request Form for Maintain Student Status**

Office of Academic	
Receipt No.....	
Date Receipt.....	
Time.....	
Receiver.....	

Semester..... Academic year .....

**① To The Registrar**

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Student Name Mr./Miss/Mrs.....

Student ID

Program of study..... E-mail .....

Cumulative grade point average..... Student status.....  Normal  Probation No.....

would like to register for maintain student status

Reason for request .....

Signature .....

**② Advisor's comment**

Approved  Not Approved .....

Signature .....

**③ Tuition and Other Fees**

Item	Amount (Baht)
1. Registration Fee for Maintain Student Status	1,500
<b>Total</b>	

Signature .....  
(.....)  
Registration Officer  
Date .....

Signature .....  
(.....)  
Financial Officer  
Date .....