



R10

Chulabhorn Graduate Institute

Request for Educational Documents

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

Student Name: Mr./Ms./Mrs.....

Program of study.....

Degree ☐ Master ☐ Doctoral

E-mail.....Telephone.....

Purpose of request.....

Item (s) of Request

Academic Support Division

Date of Receipt.....

Time of Receipt.....

Received by.....

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Student ID

Items	No. of copies	Amount (baht)
() Academic Transcript 100 baht/copy <input type="radio"/> Current student • Number of sealed envelopes requested <input type="checkbox"/> • Number of transcripts per envelope <input type="checkbox"/>		
<input type="radio"/> Graduated, pending the approval from the Institute Council • Number of sealed envelopes requested <input type="checkbox"/> • Number of transcripts per envelope <input type="checkbox"/>		
<input type="radio"/> Graduated/Terminated student status • Number of sealed envelopes requested <input type="checkbox"/> • Number of transcripts per envelope <input type="checkbox"/>		
() Recommendation Letter of Student Status (for current student) 100 baht/copy		
() Recommendation Letter of Graduation (for graduated) 100 baht/copy		
() Graduation Completion Certificate 100 baht/copy		
() English Language Proficiency Certificate 100 baht/copy		
() Others (Please specify) 100 baht/copy		
Remark: Free of Charge for educational purpose (s).	Total	

Signature.....

...../...../.....

(FOR FINANCIAL OFFICER)

Receiving the payment of fee ofbaht according to the receipt No.....

Signature.....Date.....

(FOR RECEIVER)

Receiver's signature Date

Authorized person please produce: ☐ ID card ☐ Government/Enterprise employee card☐ Driving license ☐ Other ID card with photo

Card number Issued by