



Naresuan University

NU19

Date.....Month.....Year.....

Resignation Request Form

Level Undergraduate
 Master Doctorate

Semester..... Academic Year.....

Student ID

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To: The President

① I (Mr./Ms./Mrs.).....

Faculty.....Major.....Mobile Phone No.....E-mail.....

Contact Address.....

would like to resign as a student from NU beginning semester.....academic year.....

Other documents (if available).....

For the following reason(s).....

.....

Thank you for your consideration.

Student's signature.....

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Parent/Guardian's Approval

I.....as parent/guardian of

I (Mr./Ms.)..... allow him/her to resign from NU.

Parent/Guardian's signature.....

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<p>② Opinion of Program Advisor</p> <p>.....</p> <p>.....</p> <p style="text-align: right;">Signature..... (.....)/...../.....</p>	<p>④ Opinion of Registration Office</p> <p>.....</p> <p>.....</p> <p style="text-align: right;">(Mrs. Wassana Pajadee) Head of the Registration and Evaluation Office</p>
<p>③ Opinion of the dean of the faculty that the student is enrolled in</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved because.....</p> <p style="text-align: right;">Signature..... (.....)/...../.....</p>	<p>⑤ Order by NU</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Not Approved because.....</p> <p style="text-align: right;">(Miss Jaruaryporn Sudsawad) Director, Division of Academic Affairs Acting for the President Naresuan University</p>
<p>⑥ Registration Office (Academic Office use only.)</p> <p><input type="checkbox"/> For Acknowledgement</p> <p><input type="checkbox"/> For Processing</p> <p><input type="checkbox"/> For Record</p> <p><input type="checkbox"/> Others</p> <p style="text-align: right;">Signature...../...../.....</p>	