



**Request for Make Up Examination Form**

**Date :** .....

**To : Deputy Dean for Academic Affairs of the Faculty of ICT, Mahidol University**

My name is (Mr. / Miss) .....

**Student ID :**  **Section :** .....

**Mobile phone no. :** ..... **MU student mail :** .....

Submit this request for make up the examination of

**Subject ID :** .....

**Subject Name :** .....

**Instructor :** .....

**Semester:**  Midterm  Final of .....Semester, Academic Year.....

**Reasons**.....  
.....  
.....

**Best Regards,**

Signature.....student  
( ..... )  
...../...../.....

<b>Counter office accepted document :</b> Receiver.....Date .....	<b>Academic officer accepted document :</b> Receiver.....Date .....
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<b>Deputy Dean for Academic Affairs's Opinion:</b>	
<input type="checkbox"/> Allowed	<input type="checkbox"/> Not allowed
Signature..... Asst. Prof. Dr. Thanapon Noraset (...../...../.....)	