



## Section/ English Group Changing/ Inform Schedule' Request Form

Date: \_\_\_\_\_

Subject: Section/ English Group Switching/ Inform schedule of Semester: \_\_\_ / \_\_\_\_\_

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

**FOR OFFICE USE:**

Recipient: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_

I,  Mr.  Miss \_\_\_\_\_ Student ID:

Current Student Year: \_\_\_\_\_ Section: \_\_\_\_\_ Major: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Would like to request as followings:**

#1 Switch my (current) section from section: \_\_\_\_\_ to section: \_\_\_\_\_

#2 Switch/Change group of English subject (subject ID) ITLG: \_\_\_\_\_ Subject Title: \_\_\_\_\_

From (current) Gr.: \_\_\_\_\_ Aj.: \_\_\_\_\_

To Gr.: \_\_\_\_\_ Aj.: \_\_\_\_\_

*Request #1 & #2 are required to provide the reason & get a switch person. The switch person please identify in below part*

Reason: \_\_\_\_\_

**Switch person part (Requests with no swapped persons will be considered based on the reasons given.)**

Switching with  Mr.  Miss \_\_\_\_\_ Student ID: \_\_\_\_\_ I acknowledged this

switching request and I will switch my current section: \_\_\_ to section: \_\_\_, Signature \_\_\_\_\_ Date: \_\_\_\_\_

#3 Retake/Re-grade student informs their registered subjects (write down subject(s) on the backed page table)

#4 Student requests to be assigned to subject group (write down subject(s) & Group below)

I would like to be assigned to Subject ID: \_\_\_\_\_ Subject Title: \_\_\_\_\_,

Section/ Group \_\_\_\_\_, Instructor: Aj. \_\_\_\_\_

**Remarks:**

1. Student who requests for #2 and #3, you need to fill out class schedule table at the back page of the form.
2. \*\*\*Student are required to list all registered subjects with class schedule in provided table next page, submit the form without the class time information may cause your request will not be considered.\*\*\*
3. The form must submit to Academic Administration not later than end of first week of the semester.
4. Only completed fulfilling request form will be considered, please make sure that you have done that.

Student signature: \_\_\_\_\_

**Deputy Dean for Academic Affairs / Instructors' opinion**

Allowed  Not allowed  Other \_\_\_\_\_

Because: \_\_\_\_\_

Signature \_\_\_\_\_

Instructor's Signature \_\_\_\_\_

(Asst. Prof. Dr. Thanapon Noraset)

Deputy Dean for Academic Affairs

Date: \_\_\_ / \_\_\_ / \_\_\_

Schedule of Name: \_\_\_\_\_ ID: \_\_\_\_\_ Year: \_\_\_\_\_ Section: \_\_\_\_\_ Major: \_\_\_\_\_

Original Schedule	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	9.00-12.00 am.					
	Subject Code _____					
	Subject _____					
	Instructor _____					
	Year ___ Sec ___ Group _____					
	1.00-4.00 pm.					
	Subject Code _____					
	Subject _____					
	Instructor _____					
Year ___ Sec ___ Group _____						
Revised Schedule	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	9.00-12.00 am.					
	Subject Code _____					
	Subject _____					
	Instructor _____					
	Year ___ Sec ___ Group _____					
	1.00-4.00 pm.					
	Subject Code _____					
	Subject _____					
	Instructor _____					
Year ___ Sec ___ Group _____						

**Remark : 1. Scheduling conflicts cause, please use only red pen writing.**

**2. Regular Classes (not-retake) need to remain one section.**