



**Application for Appointment of Doctoral Qualifying Examination Committee
The Sirindhorn International Thai – German Graduate School of Engineering**

Date.....

Subject : Request for Appointment of Doctoral Qualifying Examination Committee

To : TGGGS Dean

Name (Mr./Mrs./Miss).....Last Name.....

ID. No. - - -

Education level : Doctoral Degree

Program :Department :

Address :

Mobile :E-mail Address :

Research Proposal:

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I wish to apply for approval of appointment of doctoral qualifying examination committee

- | | |
|------------------|----------------|
| 1.....Chairman | Signature..... |
| 2.....Member | Signature..... |
| 3.....Advisor | Signature..... |
| 4.....Co-Advisor | Signature..... |
| 5.....Co-Advisor | Signature..... |

Student's Signature

(.....)

Remarks: 1. 1-3 advisors for doctoral degree student.

2. Enclose advisor's resume for new advisor/member who has not been in the TGGGS advisor/committee member list (TG.55).

Consent of Program Coordinator and Head of Department

Research Proposal has been checked for its uniqueness as well as English Proficiency Test.

For Approval

Other.....

Department Academic Affairs' Officer:	Program Coordinator:	Head of Department:
Signature.....	Signature.....	Signature.....
(.....)	(.....)	(.....)
Date.....	Date.....	Date.....

**Memo by the TGGs Academic Affairs
To TGGs Associate Dean for Academic Affairs**

Number of Committee Members	Qualification	
Chairman.....	Qualified	Not Qualified
Member.....	Qualified	Not Qualified
Advisor.....	Qualified	Not Qualified
Co-Advisor.....	Qualified	Not Qualified
Co-Advisor.....	Qualified	Not Qualified

For Approval For Consideration

Signature.....
(.....)
Date.....

Approval of TGGs Associate Dean for Academic Affairs

Approved
Approved with condition.....
Not approved
Other

Signature.....
(.....)
Date.....