Request for Thesis Proposal Approval Form (Interdisciplinary Program) Graduate School, Chulalongkorn University

	☐ Master degree ☐ Doctoral degree
First-Last Name (Mr./Mrs./Ms.)	Student's ID Number
Interdepartmental program student in Nanoscience	e and Technology Program Thesis credits
	Semester of Academic Year
Thesis title in Thai (Type only)	Tel
	Tel
Thesis co-advisor (if applicable)	Tel.
Thesis co-advisor (if applicable)	Tel.
Thesis examination committee members	
	Chair
	Thesis principal advisor
	Thesis co-advisor (if applicable)
	External committee
	Committee member
	Committee member Committee member
	Committee member
(Signature)	(Signature)
()	()
Candidate	Thesis principal advisor
	/
	man subjects and/or animal experimentation)
Approved by a Committee for	Faculty
Responsible for ethics on human and/or animal expe	rimentation in Meeting No.
Date as appears on a	ttached document.
	Signature
	(Director, Interdisciplinary Program)
	/
Thesis title of interdisciplinary program should be int	
☐ Thesis Title is an integrated science between	and
	ocial Science
☐ Thesis Co-advisor is	
	that is the institute of
Δ Responsible for curriculums Δ Collab	
☐ External scholar from the institute	
	A 11 D' (C1 M L' L' L'
Approved by the Administrative Committee of the	Approved by Director of the Multidisciplinary
Interdisciplinary Program No. Date	Program No. Date
Tvo.	
(Signature)	
(Asst. Prof. Ratthapol Rangkupan, Ph.D.)	(Signature)
	(Assoc.Prof. Yootthana Chuppunnarat, Ph.D)
Director, Interdisciplinary Program	Dean, Graduate School
/	/

Request for Thesis Proposal Approval Form (Interdisciplinary Program) Graduate School, Chulalongkorn University

	□ Doc	☐ Doctoral Degree ☐ Master Degree										
Name (Mr./Mrs./Miss)												
Program Nanoscience and Technology	<u></u>	Thesis		cr	edits	;						
Registered as a student since \square 1 st sem. \square 2 nd se	em. Academ	nic Year										
Contact address during thesis operation												
TelE												
Thesis Title (Thai)												
Thesis Title (English)												
Advisor												
Co-advisor (if applicable)	Tel		Email_									
Objective:												
Rationale/ Theoretical Background/ Hypothesis												

Step and Procedure for Thesis Work Plan

Step	Activities*	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

* Thesis started from (month) (Year) Expected Outcome from this research			
	(91		
	(Signature)	Candidate	
		/	