



**Request for Make Up Examination Form**

**Date :** .....

**To : Assistant 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>	<b>Academic officer accepted document :</b>
Receiver.....Date .....	Receiver.....Date .....

<p><b>Assistant Dean For Academic Affairs's Opinion:</b></p> <p><input type="checkbox"/> Allowed <span style="margin-left: 200px;"><input type="checkbox"/> Not allowed</span></p> <p style="text-align: right;">Signature.....</p> <p style="text-align: right;">Dr. Thanapon Noraset</p> <p style="text-align: right;">(...../...../.....)</p>
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