

Faculty of Science, Chulalongkorn University

Thesis Examination Report Form

Thesis title: (Thai)

[Title must be typed exactly as approved by the Faculty of Science [Bold type]

Thesis title: (English)

[Title must be typed exactly as announced by the Faculty of Science [Bold type]

Name: [Bold type]

Student ID: [Bold type]

Degree: [Bold type]

Department: [Bold type] (if any)

Programme: [Bold type]

Semester: [first semester/second semester] [Bold type]

Academic year: [Bold type]

Number of thesis credits [Bold type] credits

[Bold type] dissertation advisor

[Bold type] Co-dissertation advisor (if any)

[Bold type] Co-dissertation advisor (if any)

Exam results are (VERY GOOD)

..... (GOOD)

..... (PASS)

..... (FAILURE)

.....
Comments from the Thesis Examination Committee

.....
In case of “very good”, the committee should please state the reason

Sign..... Committee Chair

..... Dissertation advisor

..... Co- dissertation advisor

..... Co- dissertation advisor

..... Committee

..... Committee

..... Committee

..... Committee (external experts)

.....
The committee has been notified the results of this thesis examination and agreed to submit the results to the Faculty of Science to process with the next step

(Signed)

(.....)

Head of the Department/ President of the Graduate Program Executive

...../...../.....