



The Graduate School, Kasetsart University,
Biodata Form of External Examiner
(For External Academic Staff of Kasetsart University
for a Final Oral Examination Since 2016 and Onward)

.....
To The Dean of The Graduate School via Head of Department/ Graduate Program Committee Chairperson

..... Program (Program code.....)
would like to request for presenting an external examiner's biodata as announced in the Ministry of Education Announcement on Standard Criteria on Graduate Studies B.E. 2558 (2015), Ministry of Education Announcement on Guidelines for the Administration of Higher Education Standards, BE 2558 (2015) and Kasetsart University Regulations on Graduate Studies of The Graduate School, Kasetsart University, B.E. 2559 (2016) as follows:

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

ID card or Passport Number.....Nationality

Academic Position Lecturer Assistant Professor Associate Professor
 Professor Other (Please Specify)

Education

Bachelor's Degree (full degree name) Abbreviated Degree Name:

Major Field: University:

Country of University: Year graduated:

Master's Degree (full degree name) Abbreviated Degree Name:

Major Field: University:

Country of University: Year graduated:

Doctoral Degree (full degree name) Abbreviated Degree Name:

Major Field: University:

Country of University: Year graduated:

Specialized Fields

Contact address

Telephone No. **E-mail**

Published Academic Works:

1. Published works must not be written in order to complete graduation.
2. Published works must be exact or related to the field of External Examiner registration
3. Publication must be reported in academic reference format e.g. author's name; publication title; year of publication; and name of publisher.

Part 1) An External Examiner for a final oral examination of **master's and doctoral degree students** must have at least 5 academic works published in journals listed in acceptable **international databases**. Publication must be reported in academic reference format.

1.
.....

Databases: ISI Scopus ScienceDirect
 Other (Please Specify)

2.
.....

Databases: ISI Scopus ScienceDirect
 Other (Please Specify)

3.
.....

Databases: ISI Scopus ScienceDirect
 Other (Please Specify)

4.
.....

Databases: ISI Scopus ScienceDirect
 Other (Please Specify)

5.
.....

Databases: ISI Scopus ScienceDirect
 Other (Please Specify)

** In case that External Examiner's academic work information in Part 1 is completely filled in,
the completion of academic work information in Part 2 below can be omitted **

Part 2) An External Examiner for a final oral examination of **master's degree students** must have at least 10 academic works published in journals listed in acceptable **national databases**. Publication must be reported in academic reference format.

1.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

2.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

3.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

4.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

5.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

6.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

7.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

8.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

9.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

10.
.....

Databases: ISI Scopus ScienceDirect TCI
 Other (Please Specify)

I hereby certify that all aforementioned information filled in on the application form is utterly true.

Signature

Biodata Owner/Head of Department/Graduate Program Committee Chairperson

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

To The Dean of The Graduate School,

Please be informed accordingly.

Signature

(.....)

Head of Department/Graduate Program Committee Chairperson

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