



The Graduate School
Kasetsart University

TH. 03



Request Form for Thesis Title Change by Final Oral Examination Committee

Student's Name: (Mr/ Miss /Mrs.) Last Name:

Student's ID No: Major Field: Major Code:

Final oral examination date:.....

Current Thesis Title:

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.....
.....

Proposed New Thesis Title:

.....
.....
.....

Signature:Chairperson
(.....)

Signature:Committee
(.....)

Signature:Committee
(.....)

Signature:Committee
(.....)

Signature:Committee
(.....)

Signature:External Examiner
(.....)

Remark: Please submit this form together with a Request for Thesis Approval Form Printing (TH.02-1) or a Submission Form for Thesis Binding (TH.02) to the Graduate School.