



Request Form Reimbursement of Scholarship

Ref. RRS-45/_____

Date: _____

To: Deputy Director for Student Affairs and Alumni Relations
 Director through the Assistant Director for Student Affairs and Alumni Relations (for more than 50,000 Baht)

Name: Mr. /Ms. /Mrs. _____ Nationality: _____ Student ID: _____

Degree Sought: Bachelor Master Doctoral of Curriculum: _____ School: _____

Advisor Name: _____ Scholarship Program: _____

Contact Address: _____

Mobile Phone No. _____

I request for scholarship reimbursement(s) as follows:

Requested by <u>Scholarship Recipient</u>					Reimbursement (THB) Scholarship to Student Verified by <u>SA&AR Div.</u>		
Items	Receipt No.	Amount (Expense)	Currency	Convert To THB	Allocated Budget*	Eligible	Remaining Balance
<input type="checkbox"/> Travel Expense							
<input type="checkbox"/> Airport Tax							
<input type="checkbox"/> Visa Fee <input type="checkbox"/> Visa Extension							
<input type="checkbox"/> Visa Re-entry Permit							
<input type="checkbox"/> English Proficiency Test							
<input type="checkbox"/>							
<input type="checkbox"/>							
<input type="checkbox"/>							
<input type="checkbox"/>							
Total Amount (THB)							

Sign _____ Student

Step 2: For Student Affairs and Alumni Relations Division (SA&AR)

Recommend to be approved with following student's scholarship verification:

Scholarship Source (and Line Item (if any))	Fiscal Year	Amount (THB)
<input type="checkbox"/> Sirindhorn Technology Scholarship Fund: E-6, 6.4 (1) A) Scholarship for Undergrad. Students		
<input type="checkbox"/> Sirindhorn Technology Scholarship Fund: E-6, 6.4 (1) B) Scholarship for Graduate Students		
<input type="checkbox"/>		

Not Recommend: _____

Sign _____ SA&AR Staff
 (_____)

Date _____

Step 3: For Finance and Budget Division (FIN)

Check for the scholarship reimbursement and budget support

Comment: **FIN Stamp is required. >>**

Step 4: For an Approval

Approve Recommend to be approved
 Disapprove

Sign _____ Deputy Director for SA&AR
 (Assoc. Prof. Dr. Thanwadee Chinda)
 Date _____

Note: For an approval of more than 50,000 Baht

Approve Disapprove

Sign _____ Director
 (Prof. Dr. Pruettha Nanakorn)
 Date _____