



Transfer/Exemption Credits Request Form
GRADUATE SCHOOL Phranakhon Si Ayutthaya Rajabhat University
 www.aru.ac.th/grad

To President of Phranakhon Si Ayutthaya Rajabhat University

SECTION 1 STUDENT

1. Name – Last name (Mr./Mrs./Miss).....Student's ID No.....

Phone No.....E-mail:.....

- Degree Master's Degree Plan A Type 1 Plan A Type 2 Plan B
- Master of Education (M.Ed) Education Administration Curriculum and Instruction
- Master of Business Administration (M.B.A.) Business Administration
- Master of Public Administration (M.P.A.) Public Administration
- Master of Political Science (M.Pol.Sc.) Criminology, Justice Administration and Society
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- Doctoral Degree Plan 1 Plan 2
- Doctor of Education (D.Ed.) Education Administration
- Doctor of Political Science (D.Pol.Sc.) Criminology, Justice Administration and Society
- Doctor of Business Administration (D.B.A.) Business Administration

Courses had been studied.....Major field.....

University/Institute.....

Request to transfer credits and exemption: Number of courses.....Amount of Credits.....

No.	Previous courses of study	Credits	Grade acquired	Courses to be transferred	Credits	Grade Transferred
1						
2						
3						
4						
5						

I hereby attached the following documents for consideration:

- Education Transcript Description of the courses to be transferred

Signature.....Student

Date.....Month..... Year

SECTION 2 Relevant officer

1. Advisor Approved Disapproved: reason.....

Signature.....

(.....)

Date.....Month..... Year

2 Resolution of Curriculum Management Committee (attached meeting resolution) Approved to transfer credits and course exemption; number of credits/ courses..... Disapproved: reasons.....Signature.....
(.....)

Date.....Month.....Year

3. Dean of Graduate School Approved: and submit to the registration and evaluation office. The Graduate School shall notify the results to the relevant departments. Disapproved: reasons.....Signature.....
(.....)

Date.....Month.....Year

4. Recommendations of President Approved Disapproved: reasons.....Signature.....
(.....)

Date.....Month.....Year

5. Finance Department

Received payment of fees; amount of credits..... Amount of Baht.....

Receipt no.....volume no.....

Signature.....
(Cashier)

Date.....Month.....Year

6. Registration and Evaluation office of Graduate School

Acknowledged and processed

Signature.....
(Registrar)

Date.....Month.....Year

- Remarks**
1. The course studied must not exceed 10 years
 2. Credits transfer fee; 200 Baht per credit
 3. Verify the accuracy of the information before making payment.