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**Faculty of Science**

**Staff Only**

**Date………………….**

**Time.......................................**

**SC 08**

**Thesis/Dissertation Oral examination Report**

Student’s name ………………………………………………Student ID……..……………… Semester .........../20.......

🔾 Master’s of Sciences Plan 🔾 A1 (ก1) 🔾 A2 (ก2)

🔾 Doctoral Degree Plan 🔾 1.1 🔾 1.2 🔾 2.1 🔾 2.2  
Major : …………………………............................................. Phone : …………………………….……e-mail : .................................

**2. Thesis Information**

Title in English (Approved by the examination committees) ………..

Proposal be accepted on Month Year

**3. Thesis/Dissertation oral examination report.**

Date / /. Time

Location

**Examination Committee**

1) Chairperson

2) Member

3) Member

4) Member

5) .Member

**Remarks** Submitted to the Faculty of Sciences with the form SC08/1 within 2 working days after defend the thesis/Dissertation

**4. Examination Result**

⬜ Pass (S)

⬜ Pass with condition (I) those suggested by the committee (Give the details if any)

The student/candidate has 90 days after the examination for the correction.

⬜ Unsatisfactory (U) with suggestion

Signed Chairperson Signed Member

( ) ( )

Date………./ ………………./………… Date ………../..………………./………...

Signed Member Signed Member

( ......) ( )

Date………./ ………………./………… Date ………../..………………./………...

Signed Member

( )

Date………./ ………………./…………

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| **Recommendation:**  🔾 **endorsed** 🔾 **Not endorsed**  Signed……………………………..……………. …  (……………………………………………...)  Chairperson, Degree Program Committee  Date……................….…. | **Recommendation:**  🔾 **endorsed** 🔾 **Not endorsed**  Signed……………………………..…………….  (……………………………………………...)  Head of Department  Date……......................….… |
| **Approval Status**  🔾 **Approved** 🔾 **Not Approved**  Signed …………………………………………………….  (……………………………………………...)  Dean of Faculty of Science  Date……….../………..…/…….…. | |