GS. 03-2

The Graduate School
Kasetsart University

Study Completion Form

Student's Name: (Mr./Mrs./Ms./Title).....

Degree: ☐ Doctoral ○ Plan 1.1 ○ Plan 1.2 ○ Plan 2.2 ○ Plan 2.1

☐ Master's ○ Plan A1 ○ Plan B

○ **Plan A2 (Tailor Made) for Students Enrolled Since 2021 Academic Year and Onward**

	☐ Type 1	☐ Type 2	☐ Type 3	☐ Type 4	☐ Type 5
Major Courses	≥12	≥15	≥18	≥21	≥24
Thesis	≥24	≥21	≥18	≥15	≥12

Student's ID No. : .....Major Field: ..... (Major Field Code: X .....)

Subject Group: (If any) ..... Semester/Year of Admission: ...../....., has already completed all coursework requirements and Academic Regulations of Graduate Studies, Kasetsart University as follows:

1) Major Courses Required, Seminar and Thesis / IS

Course Code	Subject Title	Credit	Type of Registration (GC/GA)	Semester and Academic Year of Registration	Grade Acquired
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2) Elective Courses

Course Code	Subject Title	Credit	Type of Registration (GC/GA)	Semester and Academic Year of Registration	Grade Acquired
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3) Conditional Courses / Other Courses e.g. 01355501 (If any)

Course Code	Subject Title	Credit	Type of Registration (GC/GA)	Semester and Academic Year of Registration	Grade Acquired
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Student's Signature: ..... Date: ...../...../.....

I hereby certify that all information provided in this Study Completion Form is totally true and completed as specified in the terms and conditions of my study field/program.

Signature: .....

(.....)

Thesis Advisor/ Independent Study Advisor

Date: ...../...../.....