## **Request for Thesis Title Change**

GS.A. 5

## to the Graduate School

	Proposal Examination	The	esis Defense	For Master's Programs	
Program Title	am Title:Field of Study:				
College/Instit	tute/Faculty:		<u> </u>	Rangsit University	
Mr./Ms./Mrs			Student ID Number:		
Previous The	sis Title:				
	nge my thesis title to the new  Fitle:				
Reason:				······································	
SignatureStudent Date//					
Thesis Superv	visor's comments	_	Program Directo	r's comments	
	Thesis Supervisor Date/	_	signature _	Program Director	
			Comments		
	changed his/her thesis supervisor is required to provide nere.	visor,	Deputy of the G	Dean for Academic Affairs Graduate School ate//	