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| **Faculty Advisor’s Confirmation Form** | | | | | |
| **Student** | **Full name** |  | **Nationality** |  | |
| **Alien Registration Number** |  | **Degree Program**  **(Master, PhD)** |  | |
| **Program of Study(major)** |  | **C.G.P.A** |  | |
| **Matriculation date** |  | **Graduation Date** |  | |
| **Telephone** |  | **e-mail** |  | |
| **Thesis Schedule** | **Date** | **Guidance Remarks** | | | |
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| **I hereby confirm that the student above has completed his/her courses of study and is currently preparing for his/her (Master/Ph.D.) thesis/dissertation under my guidance, therefore, I request the Ministry of Justice the student’s permitted period of sojourn so that he/she can finish writing his/her thesis/dissertation**  **2014. . .** | | | | | |
| **Faculty Advisor** | **Faculty/School and job title** |  | | | |
| **Full name** | (Stamp or Signature) | **Telephone** |  | |
| To. The Head of ○○ Immigration(branch) Office | | | | |