**ใบคำร้อง**

เขียนที่ ..............................................................

 วันที่ ......... เดือน ....................... พ.ศ .............

เรียน รองอธิการบดีฝ่ายกิจการนักศึกษาและศิษย์เก่าสัมพันธ์

ข้าพเจ้า (นาย/นาง/นางสาว) ............................................................................................................................. ผู้ปกครองของ (ดช./ดญ./นาย/นางสาว) ........................................................ รหัสประจำตัวนักศึกษา ........................

คณะ/วิทยาลัย ....................................................... สาขาวิชา ........................................................ ชั้นปี ......................

ที่อยู่ที่สามารถติดต่อได้ ....................................... หมู่ ............ ซอย ............................. ถนน.........................................

ตำบล/แขวง ..................................................... อำเภอ ............................................ จังหวัด..........................................

รหัสไปรษณีย์ ............................... โทรศัพท์ ..........................................................

 มีความประสงค์ .................................................................................................................................................

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ขอได้โปรดพิจารณาให้ความอนุเคราะห์ด้วย จะเป็นพระคุณอย่างยิ่ง

 ขอแสดงความนับถือ

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