



# REGISTRATION REQUEST FORM

I am Mr. / Miss \_\_\_\_\_ ID. No.

\_\_\_\_\_ major, \_\_\_\_\_ minor(if any), cell phone no. \_\_\_\_\_ would like to

register the following (s):

Academic Year _____ <input type="checkbox"/> 1 <sup>st</sup> Semester <input type="checkbox"/> 2 <sup>nd</sup> Semester <input type="checkbox"/> Summer								
<input type="checkbox"/> BE Program			<input type="checkbox"/> BAS Programme			<input type="checkbox"/> Pridi Banomyong <input type="checkbox"/> _____		
Course Code	Section	Course Title	Course Code	Section	Course Title	Course Code	Section	Course Title

Reasons: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
Student's signature

**Note:** Students are not allowed to register for courses under Bachelor of Accounting and Bachelor of Business Administration curriculums at other programs.

*(For BBA Staff Only)*

Received by: \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time \_\_\_\_ : \_\_\_\_