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**GRD-102 (Eng) 003**

# Please type or write with readable hand writing

**Graduate School Burapha University**

**Request form for issuing a letter requesting extension to leave for study**

**to the affiliated institute/ university/ organization**

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**To Dean of Graduate School**

I am (Mr./Mrs./Ms.) Student ID # ……………………………………..

❑ Doctoral degree ❑ Master degree - plan 🔾 A 🔾 B Study type ⭘ Full-time ⭘ Part-time

Program Major/Pathway..............................................

Faculty Telephone E-mail

Doctoral dissertation/ Master thesis/ IS **Title**:

Principal advisor’ name………….............................................................

I would like to request for **issuing a letter requesting extension to leave for study** to my affiliated institute/ university/organization for the semester of ……………………academic year……………………

By issuing to (name of the director of Institute/ University/ Organization)

……………………………………………………………………………………………………………….

………………………………………………………………………………………………………………

My position at the affiliated Institute/ University/ Organization is………………………………………….

Please be informed accordingly,

Student’s name …………………………………………

 (…………………………………….)

 Date…… Month…………Year………..

|  |  |  |  |
| --- | --- | --- | --- |
| Principal advisor acknowledged | Program Director acknowledged | Dean of Faculty/Collegeacknowledged | Dean of Graduate Schoolapproved |
|  (Signed)…………………  Date………………………  |  (Signed)…………………  Date……………………… |  (Signed)…………………  Date……………………… |  (Signed)…………………  Date……………………… |

# Please type or write with readable hand writing

**Graduate School Burapha University**

**Progress Report of Dissertation/ Thesis/ IS**

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Report No.#……….Date……………….Month…………………..Year…………….

**Part 1: General Information**

**Student information**

I am (Mr./Mrs./Ms.) Student ID # ……………………………………..

❑ Doctoral degree ❑ Master degree - plan 🔾 A 🔾 B Study type ⭘ Full-time ⭘ Part-time

Program Major/Pathway..............................................

Faculty Telephone E-mail

Doctoral dissertation/ Master thesis/ IS **Title**:

**Advisory committee**

Principal advisor…………......................................................................................................................

 Department…………………………………………………………

 Faculty/ College…………………………………… University……………………………………….

 Organization (if not a university)…………………………………….

Co-advisor…………......................................................................................................................

 Department…………………………………………………………

 Faculty/ College…………………………………… University……………………………………….

 Organization (if not a university)…………………………………….

Co-advisor…………......................................................................................................................

 Department…………………………………………………………

 Faculty/ College…………………………………… University……………………………………….

 Organization (if not a university)…………………………………….

**Information about dissertation/ thesis/ IS**

* Beginning enrolled study in the academic year……………. Semester……….
* First registration for dissertation/ thesis/ IS in the academic year ……………. Semester……….
* Date of ‘Pass’ Qualifying Examination on ……………………………………. (for doctoral student)
* Date of ‘Pass’ Comprehensive Examination on …………………………. (for master student plan B)
* Date of ‘Pass the criteria (S)’ of proposal defend on……………………………..

**Part 2: Progress of Dissertation/ Thesis/ IS**

At present, the stage of Dissertation/ Thesis/ IS:

❑ Research instrument / intervention preparation ❑ Submission for IRB approval

 ❑ Assessment of Validity and reliability of research instruments ❑ Try out

❑ Data collection ❑ Data analysis

❑ Writing research results and findings ❑ Writing the discussion and recommendation part

 ❑ Preparation for oral defense ❑ Manuscript preparation for publication

❑ Others (please specify)

**The above stage** is ❑ satisfied ❑ unsatisfied for the progress of Dissertation/ Thesis/ IS

Problems or obstacle of unsatisfied (please specified)

………………………………………………………………………………………………………………….

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How to solve the problems ……………………………………………………………………………………………………………….….

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**Expected to complete** the Dissertation/ Thesis/ IS on semester…………………academic year………….

Assistance need to be completed the Dissertation/ Thesis/ IS

…………………………………………………………………………………………………………………..

Student’s name …………………………………………

 (…………………………………….)

 Date…… Month…………Year………..

Principal advisor’s opinion

Signed………………………… (Date…………….…….)

Program director’s opinion

Signed…………………………. (Date………………….)

**Dissertation/ Thesis/ IS work plan** of (Mr./Mrs./Ms.) Student ID #……………………

Program Major/Pathway..............................................

Faculty/ College………………………… Burapha University

|  |  |  |
| --- | --- | --- |
| **Dissertation/ Thesis/ IS work** |  | **Year……. /Month** |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Proposal defense |  |  |  |  |  |  |  |  |  |  |  |  |
| Revision after proposal defense |  |  |  |  |  |  |  |  |  |  |  |  |
| Preparation for trial/ experiment/ develop research instruments |  |  |  |  |  |  |  |  |  |  |  |  |
| Submission for IRB approval |  |  |  |  |  |  |  |  |  |  |  |  |
| Test of validity and/or reliability of research instruments/ pilot study |  |  |  |  |  |  |  |  |  |  |  |  |
| Implementation/ data collection |  |  |  |  |  |  |  |  |  |  |  |  |
| Data analysis |  |  |  |  |  |  |  |  |  |  |  |  |
| Writing results and findings |  |  |  |  |  |  |  |  |  |  |  |  |
| Writing discussion and recommendations |  |  |  |  |  |  |  |  |  |  |  |  |
| Oral defense |  |  |  |  |  |  |  |  |  |  |  |  |
| Revision after oral defense |  |  |  |  |  |  |  |  |  |  |  |  |
| Manuscript preparation for publication |  |  |  |  |  |  |  |  |  |  |  |  |
| Completed the study |  |  |  |  |  |  |  |  |  |  |  |  |

 Signed...................................................................... (Student)

 (......................................................................)

 Signed...................................................................... (Principal advisor)

 (......................................................................)

Signed......................................................................

 (...........................................................................)

 Dean of Faculty/ College of.......................................