

SIRINDHORN INTERNATIONAL INSTITUTE OF TECHNOLOGY ANNOUNCEMENT OF THESIS PRESENTATION

Name of Student: Student ID No.:			
Affiliation:			
Semester:			
Presentation Topic:			
Type of Presentation:	☐ Thesis Proposal		
	☐ Thesis Progress		
	☐ Thesis Final Defense		
Date / Time:	Date	Time	to
Venue:).
	Building	Campus	
Advisor:			
		Sionature	
		Dignature	(Advisor)
	Date		
All interested persons are welcomed to attend the presentation.			

Forward this form to the Academic Services and Registration Division (AS&R)