



☐ Walailak University Student (former)
☐ Student from other universities
(Please specify)
.....

Request Form for Credit Transfer
(For a student who used to study in a tertiary educational institution)

Dear Director of the Center for Educational Services

I, (Mr. / Mrs. /Miss) _____ Student ID _____
Academic system ☐ Trimesster ☐ Semester-International ☐ Trimesster-International
Level of Study ☐ Diploma ☐ Bachelor's Degree ☐ Postgraduate Studies Majoring in _____
School of _____ would like to transfer the credits from the previous institution
(specify name of institution) _____ previous program / major _____
Level of Study _____ ☐ completed the degree ☐ retired, because of _____
in year _____ GPAX _____

I have specified the courses that I would like to transfer from the previous institution and I received Grade C and above or GPAX 2.00 or equivalent and above **as specified in the page 2 of this form**. I have **attached a transcript and course descriptions received from my previous institution**. I hereby certify that the following attached documents are true and correct.

- ☐ Transcript
☐ Course Descriptions (of all courses to be transferred) **for the student who studied in another university**

Student's Signature _____
(_____)
Date _____

Note : In case of any inquiries about this request, I can be contacted at Tel. _____

1 Finance and Accounting (Pay at Government Savings Bank, Walailak University Branch)	2 Director, the Center for Educational Services
Received the fees for credit transfer amount of _____ Baht Refer to the receipt no. _____ / _____ Date _____ Signature _____ (_____) Date _____	have checked and found that the courses to be transferred from the previous institution <input type="checkbox"/> are <input type="checkbox"/> are not the curriculum in higher education or equivalent that certified by the Ministry of Education or government sectors Signature _____ (_____) Date _____
3 Dean / Head of Discipline / Chairperson of Postgraduate Studies Program Committee	4 Educational Services Officer
School's Decision approved to transfer the credit for the student totally _____ courses _____ credits Signature _____ (_____) Date _____	Process of transferring the credits <input type="checkbox"/> transferred courses are calculated in the GPAX (Former Walailak University Student) <input type="checkbox"/> transferred courses are not calculated in the GPAX (Student from Other Institutions) Signature _____ (_____) Date _____
Form effective since 25 September 2017	Page 1/2

Please complete the back page

[illegible]

For your consideration

Student's Signature _____
(_____)
Date _____

