**คำขอทั่วไป**

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

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

เรื่อง............................................................................................................................................................................

เรืยน...........................................................................................................................................................................

ข้าพเจ้า นาย/นาง/นางสาว...........................................................................................................................  
รหัสนักศึกษา..............................ชั้นปีที่...............มีความประสงค์..............................................................................

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ฉะนั้น............................................................................................................................................................

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| ที่อยู่ที่สามารถติดต่อได้  ..................................................................  ..................................................................  ..................................................................  ..................................................................  โทรศัพท์..................................................... | ขอแสดงความนับถือ  (ลายเซ็นต์).....................................................  (...........................................................................) |

ความเห็นอาจารย์ที่ปรึกษา.........................................................................................................................................

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|  | ขอแสดงความนับถือ  (ลายเซ็นต์).....................................................  (...........................................................................)  …………………../……………………………………./………………… |
| **ความเห็นของเจ้าหน้าที่** | **คำสั่ง** |
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งานบริการการศึกษาและพัฒนาคุณภาพนักศึกษา คณะสัตวแพทยศาสตร์ มหาวิทยาลัยเชียงใหม่ โทร.053948009