Job No. | | | | | | | | | | |

(Only for institution staff)

Work and Accommodation Report Form During Cooperative Education Term

Faculty of Humanities, Chiang Mai University

Please return to Educational Services and Student Quality Development Section, Faculty of Humanities, Chiang Mai University ***Kindly submit this form within the first week after the cooperative education begins***.

Name of Business (Thai/English) _____

Address No._____Road _____ Alley _____ Sub-district _____

District_____Province _____ Postal Code_____

Telephone No._____ Fax _____ E-mail _____

I would like to inform you that (Name of the student) Mr./Ms. _____

Student ID _____ Department _____ Faculty_____ has self-reported to work in cooperative education Date _____ Month _____ Year _____

Accommodation Information

Address No. _____ Road _____ Alley _____ Sub-district_____

District _____ Province _____ Postal Code _____Tel. _____

Fax _____ E-mail_____

Emergency Contact _____

Address No. _____ Road _____ Alley _____ Sub-district_____

District _____ Province _____ Postal Code _____Tel. _____

Fax _____ E-mail_____

Signature _____
( )
Cooperative Education Student
Date _____

Signature _____ (Informant)
( )
Position _____
Date _____

Educational Services and Student Quality Development Section, Faculty of Humanities, Chiang Mai University
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E-mail: humancmu.coop@gmail.com