

Recommendation of graduation Expectation:

- Master of Science Program in Service Innovation (English Program)**
- Master of Science Program in Innovative Healthcare Management (English Program)**

College of Innovation, Thammasat University

Semester..... Academic Year.....

The attached documents have been examined and therefore, we would like to certify that

นาย/นาง/นางสาว..... STUDENT ID.....
(ภาษาไทยตัวบรรจง)

MR. /MRS./ MISS.....
(ภาษาอังกฤษตัวพิมพ์ใหญ่)

has completed all subjects required according to the curriculum.

Home Address

Office Address.....

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Telephone.....

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E-mail.....

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