



FC2: CONFIRMATION OF STUDENT'S WORKPLACE

แบบฟอร์มตอบรับนิสิตฝึกงาน

**1. Contact details of organisation representative**

1.1 Contact person

Name .....

Position .....

Phone number.....

Email address .....

1.2 Name of organisation .....

Address .....

.....

Country .....

Postcode.....

**2. Organisation's decision**

ACCEPT the student for industrial training.

REJECT the student for industrial training, because

.....

If choose to ACCEPT, please provide details for the following:

3. Name(s) of the student(s) accepted

.....  
.....  
.....

4. Internship works/activities/projects which may be assigned for the student(s):

.....  
.....  
.....

5. Training period: Start (dd/mm/yy) .....End (dd/mm/yy).....  
(Suggested start date on 1 June 2021 and end date on 30 July 2021)

Contact person's signature ..... Date (dd/mm/yy) ...../...../.....  
(Please print this page and sign. You may also use electronic signature)

**After completing this form (by typing or writing legibly in English), kindly email as a PDF file to [moodle@eng.chula.ac.th](mailto:moodle@eng.chula.ac.th) AND to the student(s) at your earliest convenience, and **before 7 May 2021.****