

JOB NO.

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Building Quality and Life Values Through Work Experience

Please return to Co-op Center

within the first week after the student has reported for work

Fax #: 0-4422-3045, 0-4422-3053

Workplace (in Thai or English)

Address: House # _____ Road _____ Street _____ Sub-district _____

District _____ Province _____ Zip code _____

Tel.: _____ Fax: _____ E-mail: _____

Please know that Mr./Miss _____

Student ID _____ School _____ Institute _____

has reported for co-op work on _____ month _____ year _____

Accommodation information

Address: House # _____ Road _____ Street _____ Sub-district _____

District _____ Province _____ Zip Code _____

Tel.: _____ Fax: _____ E-mail: _____

In case of emergency, please contact

Address: House # _____ Road _____ Street _____ Sub-district _____

District _____ Province _____ Zip Code _____

Tel.: _____ Fax: _____ E-mail: _____

Signature _____

(_____)

Co-op Student

Date: _____